# APPLICATION FOR GRADUATE ADMISSION

**FISK UNIVERSITY**
**1000 17TH AVENUE NORTH**
**NASHVILLE,TN 37208**

**BIOGRAPHICAL INFORMATION** (Please print or type in black ink)

Legal Name_____
Last First Middle (Complete) Jr., etc.

Permanent Address_____
Number and Street Apt. #

_____
City State Zip Code Country

_____
Daytime Telephone (Include Area Code) Evening Telephone (Include Area Code)

E-mail Address_____ FAX Number_____

Birth Date_____ Gender_____ Social Security Number_____
Month Day Year M/F

Graduate Program for which you are applying: ☐ Biology ☐ Chemistry ☐ Physics ☐ Psychology
**(Please check appropriate box)**

Place of Birth_____

Citizenship_____ If non U.S., type of Visa_____

**ITEMS WITHIN THIS SECTION ARE OPTIONAL**:

Marital Status_____

How would you describe yourself? (Please check one)

☐American Indian, Eskimo, or Aleut ☐ Asian/Oriental ☐White, Anglo, Caucasian American

☐Black, Negro or African-American ☐Spanish American or Chicano (Including Puerto Rican) Other_____ (Specify)

**EDUCATION AND WORK EXPERIENCE**
Please list all the educational institutions that you have attended since graduation from high school.

| Name of School | Location (City,State,Zip) | Date Attended | Major | Degree |
|---|---|---|---|---|
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Please send an official transcript from each post-secondary institutions that you attended.

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**PERSONAL STATEMENT** - Please write a personal statement indicating why you want to attend graduate school and Fisk University. Share any information that you feel will allow the admission committee members to gain insight about you and indicate career objectives.

**WORK AND PROFESSIONAL EXPERIENCE** – Please list work experience since graduation from high school.

| Dates From | To | Position | Company/Location |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**TEST INFORMATION**

Please indicate which standardized tests you have taken, the dates and scores. If you have taken the GRE in the past five years, please have the scores forwarded to the Office of Admissions at Fisk. **The GRE general scores are required.**

GRE Scores: Verbal_____ Quantitative_____ Analytical_____ _____
Date taken

Subject:_____ _____
Date taken

TOEFL: (Required for non-native English speakers) _____ _____ _____ _____
Date Score ☐ Written ☐ Computer

OTHER: _____
Name of Test Date taken Score

**ACADEMIC HONORS AND ACCOMPLISHMENTS**

List below any academic honors, scholarships, memberships in honorary societies and scholarships that you have received. List also any research papers you have authored or co-authored, and other research experience.

_____

_____

_____

_____

_____

**REFERENCES** – Please list the names and addresses of three persons you have asked to provide a recommendation. At least two should be former instructors in the major field, acquainted with your educational background and personal character. The letters of reference should be mailed directly to our Office of Admissions.

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_____

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_____

**FINANCIAL** - Will you require financial assistance? ☐Yes ☐No

I certify that the above statements are correct and complete. Deliberately falsifying information may result in dismissal from the University without a degree.

_____

Name (Typed or Printed) Signature Date

Mail or deliver this completed application form to: Office of Admissions, Fisk University, 1000 – 17th Ave. N., Nashville, TN 37208. Please enclose a $50.00 check or money order payable to Fisk University for the application fee. To facilitate prompt review of your application, send a copy of the application form to the Chair of the graduate program to which you are applying.

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# FISK UNIVERSITY

## Graduate Study
## Letter of Recommendation

**To be completed by applicant:**

Name_____
Last First Middle

Department to which you are applying _____

I agree that the recommendation I am requesting shall be held in confidence by Fisk University and hereby waive my rights of access to this recommendation. ☐ Yes ☐ No

Signature _____ Date _____

**To be completed by the recommender:**

Please rate the applicant relative to other students or employees who have undertaken graduate study in recent years.

| | Top 2% | Top 10% | Top 25% | Top 50% | Lower 50% | No basis for judgment |
|---|---|---|---|---|---|---|
| Academic Performance | | | | | | |
| Emotional Stability | | | | | | |
| Intellectual Ability | | | | | | |
| Motivation and Diligence | | | | | | |
| Speaking Ability | | | | | | |
| Teaching Ability | | | | | | |
| Writing Ability | | | | | | |
| Work Ethic | | | | | | |
| Ability to Work Independently | | | | | | |

The University would appreciate a statement from you about this applicant. How long and in what capacity have you known the applicant? What is your assessment of the applicant's strengths and weaknesses? What is your opinion of the applicant's ability to carry on study and research at the Master's level? Please include any additional information that would be helpful to the University in evaluating the applicant. Use an additional sheet if necessary.

Name of Recommender _____
Institution _____ Position _____
Signature _____ Date _____

Please return this form to the Office of Admissions, Fisk University, 1000 – 17th Ave. N., Nashville, TN 37208.

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# FISK UNIVERSITY

## APPLICATION FOR GRADUATE FINANCIAL ASSISTANCE

This application should be completed and sent to the Office of Admissions, Fisk University, Nashville, TN 37208. An application for admission to the Graduate Program should also be submitted. Please type all information.

Legal Name_____ Gender: Male___ Female___
Last First MI

Permanent Address_____
Street City State Zip

Home Phone (_____)_____ Work Phone (_____)_____

FAX #(_____)_____ E-Mail_____

Marital Status: Single ☐ Married ☐ Date of Birth_____ _____
Social Security Number

U.S. Citizen: Yes ☐ No ☐ If not, Country of Citizenship_____

Visa Type _____ Permanent Resident: Yes ☐ No ☐

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Financial support at Fisk will generally be limited to tuition scholarships and research assistantships. The research assistantships are provided by faculty who have on-going research projects with external support. To help us evaluate your request, please describe in general terms your undergraduate background and any relevant work or research experience. Continue on an additional sheet if needed.

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Please sign and date your application certifying that your statements are complete and honestly presented.

_____ _____
Signature Date

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