

WAYNE STATE UNIVERSITY

Graduate Renewal Application

Return to:

Graduate Admissions
Wayne State University
Detroit, MI 48202
(313) 577-3577

This Renewal Application may be used to update your application for the three consecutive semesters following your original application for regular admission. Consult the chart below to determine if this is the appropriate application.

If you applied initially for:

Fall semester

Winter semester

Spring/Summer semester

You may renew up to and including:

Winter, Spring/Summer, or Fall

Spring/Summer, Fall, or Winter

Fall, Winter, or Spring/Summer

Recommended Application Dates:

July 1 for fall semester

November 1 for winter semester

March 1 for spring/summer semester

If you wish to apply for any semester thereafter, you must initiate the admission process from the beginning. This includes completing an application for admission, submitting another application fee and requesting all official transcripts be sent to the Office of University Admissions. If you attended or are currently enrolled at another institution since your original admission application, please request your official transcripts be sent to University Admissions.

Name: Last First Middle Former Name (if applicable)

Social Security Number

Birthdate

Gender

Year _____ Month _____ Day _____

 Male Female

Permanent Address

City

State

ZIP

Mailing Address (City, State, ZIP) if different

Phone Number

Home (____) _____ Work (____) _____

Race: (Check ONE box only.) *Note: Even if you are multi-racial, please answer this question by indicating either the race you identify with most or the race with which you are usually associated in the community.*

A. HispanicD. White (non-Hispanic)B. Asian or Pacific Islander (API)E. Black (non-Hispanic)C. American Indian, Eskimo, or Aleut (AIEA)

Are you Multiracial? Yes No *For purposes of this question, you are multi-racial if you have parents from more than one of the broad race categories listed above, or if your parents regard themselves as being multi-racial.*

Country of citizenship

County of residence

State of legal residence? How long have you lived there?

Non-U.S. citizens only: Include a photocopy of both sides of Permanent Resident Card with this application.

I have an immigrant visa. Date issued: _____ A# _____ I currently have a _____ visa.

Which tests have you taken? TOEFL date: _____ TWE date: _____ MELAB date: _____

Select the college in which you want to take classes. (check only one)

 Business Administration Law Pharmacy and Allied Health Education Liberal Arts Science Engineering Lifelong Learning Social Work Fine, Performing and Communication Arts Medicine Urban, Labor and Graduate School Nursing

Metropolitan Affairs

Major _____ Concentration (if known) _____

Degree Level Desired

 Ed. D. Ph. D. Senior Rule (WSU students only) Master's Pharm. D. Specialist

NON-DEGREE
(Please include a brief statement of your educational objectives).
 Non-Degree
 Graduate Certificate

Indicate the semester for which you are renewing your application.

Fall 19 _____ Winter 19 _____ Spring/Summer 19 _____

Recommended application dates: July 1 for fall, November 1 for winter, and March 1 for spring/summer

Previous Higher Education Record - You must indicate all collegiate institutions attended. Omissions from this section will be considered a misrepresentation of credentials and may result in disqualification for admission or dismissal.

Name of institution	Dates of attendance	Degree	Office use only

Please write a brief statement of your educational activities since you last applied for graduate admission. We are particularly interested in additional coursework or degrees completed. Also, please use this space for a brief statement of your educational objectives.

Please provide the following employment information:

Name and address of employer	Telephone number	Type of work	Dates

I certify that the information given is complete and accurate. If admitted, I agree to comply with the regulations of WSU.

Signature _____ **Date** _____