



Read Instructions on Page 3 before Completing
APPLICATION FOR ACCELERATED PROGRAM
Graduate Studies – Southeast Missouri State University

NOTE: AN INCOMPLETE APPLICATION WILL NOT BE PROCESSED FOR ADMISSION.

To be completed by applicant. Please print clearly.

I intend to be an online student and take only web-delivered courses: Yes No

I am applying for the Accelerated Program for: MBA Ms of Science in Management

1. SE Student ID Number: _____

2. Legal Name (Last, First, Middle, Initial): _____

3. Semester you desire to start the accelerated program (Spring, Summer, Fall):

Semester: _____ Year _____

4. Permanent Legal Home Address

Street: _____

City and State: _____

Zip Code: _____ Phone #: _____

How long have you lived in the state of your legal residence? ___ Yrs. ___ Mos.

5. What courses will you be using for graduate credit? (choose up to 4 courses)

Course 1: _____ Semester: _____ Course 2: _____ Semester: _____

Course 3: _____ Semester: _____ Course 4: _____ Semester: _____

6. Do you intend to complete your graduate degree at Southeast MO State University? Yes No

7. Semester and year you intend to complete your bachelor's degree:

*8. Sex: Male Female 10. Date of Birth (mm/dd/yr): _____

*9. Race: American Indian or Alaskan Native Asian
 Black or African American Native Hawaiian or Other Pacific Islander
 Hispanic/Latino White

*10. Marital status and dependant information is not used in determining admission. It is useful in providing information to nontraditional students: Single (No dependents) Single (Dependents)
 Divorced Married
 Widowed

11. Undergraduate Major: _____

Signature of MBA Director _____

Students completing courses for graduate credit are held fully responsible for regulations as outlined in the *Graduate Bulletin*.

Application must be received in the Graduate Business Programs office one week prior to the start of semester in which accelerated coursework is requested.

No changes to requested coursework can be made after the date listed in the university academic calendar as the last date to drop a full semester course.

Southeast Missouri State University is hereby authorized to obtain, from any institution I have previously attended, information pertinent to my admission to Southeast Missouri State University.

I certify that the information given herein is correct to the best of my knowledge.

Applicant's Legal Signature

(WRITE your legal signature in INK)

*Personal data is important in determining the effectiveness of efforts related to the provision of equal educational opportunity. For this reason, it is required. The providing of this information is optional and will not be used in determining admission status.

If you are interested in a Graduate Degree here at Southeast Missouri State University, you **MUST** complete the regular admission application in addition to this form. The admission application form can be downloaded from the [Graduate School's web site](#). Please call the Graduate Office for further information.

INSTRUCTIONS

Note: This form does not admit you to a degree program.

Decisions cannot be made regarding your application unless relevant information is supplied on the application form. Any incomplete application will not be processed and will be returned to the applicant for completion.

- **APPLICATION FORM:** Complete Application by typewriter or print in ink. Illegible, incomplete, or pencil applications are not acceptable and will be returned.

The Graduate School cannot accept responsibility for any misunderstanding of instructions or regulations, misdirected documents, or other delays. It is the STUDENT'S RESPONSIBILITY to see that all credentials reach the Graduate School by the appropriate deadline.

SPECIAL STUDENT DISCLAIMER **MUST be Signed**

A special student is one who does not seek a degree. A special student may enroll for classes for which he/she has the prerequisites without submitting transcripts of previous work. A special student is required to sign the following disclaimer at the time of registration.

_____ SE Student ID _____

Print your name (First, Middle, Initial, Last)

I certify that I have the necessary preparation for this course. I understand my enrollment in this course does not constitute admission to a degree program at Southeast Missouri State University. I further recognize that there is no guarantee that credits earned from my enrollment will be applicable to a degree at Southeast Missouri State University. **(AS OF FALL 2014, NO MORE THAN TWELVE HOURS TAKEN AS A SPECIAL STUDENT MAY BE APPLIED TO A DEGREE PROGRAM)**

_____ Write your legal signature _____

_____ Date _____

Recognizing its responsibility regarding Section 504 of the Rehabilitation Act of 1973, SEMO is committed to providing all students equal access to its educational opportunities. If you have a handicap, contact the Dean of Students' Office for assistance with class scheduling, parking, transportation, study aids, etc. To allow us to anticipate your special needs, contact us prior to arrival. Southeast Missouri State University is committed to providing leadership in taking affirmative action to attain equal educational and employment rights for all persons, without regard to sex, handicap, race, or other legally protected classifications. This policy is placed in this document in accordance with state and federal laws including Title IX of the Educational Amendments of 1972, and Sections 503 and 504 of the Rehabilitation Act of 1973. This policy extends to disabled veterans of the Vietnam era. Please direct equal opportunity inquiries to the Affirmative Action Officer, Southeast Missouri State University, Cape Girardeau, MO 63701-4799 (573-651-2524).