

The University of North Carolina at Pembroke  
Graduate Program  
Application for Admission

Please type or print in black/blue ink.

A non-refundable \$45.00 application fee must accompany this form. A \$15.00 processing fee must also accompany this application, if applying to the Fall semester after April 15th, the Spring semester after October 15<sup>th</sup> or for the Summer semesters after March 15<sup>th</sup>.

**Entering Term:** Fall\_\_\_ Spring\_\_\_ Summer I\_\_\_ Summer II\_\_\_ Year\_\_\_\_\_

**Entering Status:** Seeking Master's Degree \_\_\_ Visiting Student \_\_\_ Enrichment \_\_\_ Special Undergraduate \_\_\_  
Additional Graduate Licensure \_\_\_ Licensure Renewal \_\_\_

**Intended Major:** \_\_\_\_\_

**Are you seeking a program leading to a North Carolina teaching license?** Yes \_\_\_ No \_\_\_

**Legal Name:** \_\_\_\_\_  
Last First Middle Maiden (if not applicable put N/A)

**Please list ALL previous names used:** \_\_\_\_\_

**Permanent Home Address:** (Physical address)

\_\_\_\_\_  
Street City/Town County State Zip Code

Telephone: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Work Cell phone

E-Mail Address: \_\_\_\_\_

**Mailing Address:** (If different than physical address)

\_\_\_\_\_  
Street City/Town State Zip Code

**Emergency Contact Information:** Please provide a name and phone number of someone through whom you may be contacted throughout the year:

Name \_\_\_\_\_ ( ) \_\_\_\_\_  
Last First Relationship Telephone

**Teacher Licensure:** If you are enrolling in one of the programs leading to North Carolina Department of Public Instruction licensure, list **all** teaching licenses held. **A copy of all current teaching licenses must be submitted with your application.**

Do you hold a current Teacher’s License? Yes \_\_\_\_\_ No \_\_\_\_\_ State Issuing: \_\_\_\_\_ Licensure area(s): \_\_\_\_\_

**Work Experience:**

CURRENT EMPLOYER/ADDRESS	CITY/STATE/ZIP	DATES: (START DATE – END DATE OR CURRENT DATE)
EMPLOYER/ADDRESS	CITY/STATE/ZIP	DATES: (START DATE – TO END DATE)
EMPLOYER/ADDRESS	CITY/STATE/ZIP	DATES: (START DATE – TO END DATE)

**If you have had more than three employers, please list additional information on separate sheet.**

**Educational Preparation:**

List all colleges and universities you have ever attended, most recent first, even if you did not complete a term. (Submit **2 official** copies of transcripts from every institution attended to: UNC Pembroke, School of Graduate Studies, P.O. Box 1510, Pembroke, NC 28372)

INSTITUTION	DATES ATTENDED	MAJOR	DEGREE	NAME TRANSCRIPT IS UNDER
INSTITUTION	DATES ATTENDED	MAJOR	DEGREE	NAME TRANSCRIPT IS UNDER
INSTITUTION	DATES ATTENDED	MAJOR	DEGREE	NAME TRANSCRIPT IS UNDER
INSTITUTION	DATES ATTENDED	MAJOR	DEGREE	NAME TRANSCRIPT IS UNDER

**If you have attended more than four institutions, please list additional information on separate sheet.**

**Entrance Examination**

**An entrance examination is required for entrance to all programs: (Official score reports must be sent to UNC Pembroke, School of Graduate Studies, P.O. Box 1510, Pembroke, NC 28372) Scores must be no more than five years old at the time of application. Please circle the test(s) you plan to take or already have taken.**

<b>UNCP Code</b>	<b>UNCP Code</b>
<b>1363</b> Miller Analogies Test (MAT)	<b>DP8-3F</b> Graduate Management Admission Test (GMAT)
<b>R5534</b> Graduate Record Exam (GRE)	<b>(Required for MBA Program only)</b>
<b>R5534</b> Praxis II (Accepted for English Education Program only)	International English Language Testing System (IELTS)
<b>5534</b> Test of English as a Foreign Language (International applicants only)	<b>(International applicants only)</b>
	To be taken in April, May or June E201
	To be taken in July, August or September E202
	To be taken in October, November or December E203
	To be taken in January, February or March E204
	IELTS Specimen Pack E205

**Recommendations:** Names and Positions of three individuals who can provide academic or professional recommendations for you. Recommendations should be requested from employers or supervisors familiar with your professional competence or from former professors who can comment on your academic potential for success in graduate school. \*Applicants applying to the School Administration program must request recommendations from your current school Principal and other administrators. Recommenders must mail forms to: UNC Pembroke, School of Graduate Studies, P.O. Box 1510, Pembroke, NC 28372.

NAME	POSITION/TITLE
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The University of North Carolina at Pembroke  
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Demographic Information

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Last First Middle

Submission of your Social Security Number constitutes acknowledgement that it is requested solely for administrative record-keeping accuracy, and to provide a personal identifier for the internal records of the University.

Gender: Male  Female  Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of birth: \_\_\_\_\_  
Month Date Year

**Ethnic Origin**

African American  Asian/Pacific Islander  Hispanic  Native American  White  Other

Are you a legal resident of North Carolina? Yes  No  If yes, since what date? \_\_\_\_\_  
Month/Year

If you are a legal resident of North Carolina, you must also complete and submit North Carolina Resident Tuition Application in order to be considered for in-state tuition status.

**Citizenship:** \_\_\_\_ (Select appropriate letter code)

C=USA R=Permanent resident alien N=Non-immigrant alien F= Foreign Student  
(Must submit a copy of your valid Green Card) (Must submit a copy of your validated Visa) (Must complete additional forms for I-20 Application)

Country of Citizenship: \_\_\_\_\_ Visa Type: \_\_\_\_\_

**Please note: Applicants with an F1 or J1 visa are never eligible for in-state tuition rates.**

**Campus Safety Questions** – Your “yes” answer to one or more of the following questions will not necessarily preclude your being admitted. However, your failure to provide complete, accurate, and truthful information will be grounds to deny or withdraw your admission, or to dismiss you after enrollment. For the purposes of the following six questions, “crime” or “criminal charge” refers to any crime other than a traffic-related misdemeanor or an infraction. You must, however, include alcohol or drug offenses whether or not they are traffic related. Circle the appropriate response to each item.

Have you ever been convicted of a crime? Yes No

Have you entered a plea of guilty, a plea of no contest, a plea of *nolo contendere*, or an Alford plea, or have you ever received a deferred prosecution or prayer for judgment continued, to a criminal charge? Yes No

Have you otherwise accepted responsibility for the commission of a crime? Yes No

Do you have any criminal charges pending against you? Yes No

Have you ever been expelled, dismissed, suspended, placed on probation, or subject to any disciplinary sanction by any school, college, or university for non-academic reasons? Yes No

If you have ever served in the military, did you receive any type of discharge other than an honorable discharge? Yes No

Currently serving Never served

If you answered “yes” to any of the six questions above, please list additional information on separate sheet to explain the circumstances.

Please be certain that all items contain complete, accurate information and notify the Graduate School office promptly, in writing, of any changes.

*I affirm that all information contained in this portion of my application is accurate and complete. Inaccurate or incomplete information violates the UNCP academic honor code and will be grounds to deny or withdraw your admission, or to dismiss you after admission.*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**The University of North Carolina at Pembroke**  
**School of Graduate Studies**  
P.O. Box 1510  
Pembroke, NC 28372  
**North Carolina Resident Questionnaire\***

For any inapplicable questions, write N/A. Whenever "date" is requested, list month/date/year.

Full Name: \_\_\_\_\_  
Last First Middle

Current mailing address: \_\_\_\_\_  
Number Street City State Zip

How long at this address? (years/mo) \_\_\_\_\_ Since (date) \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

If less than one year, please list any other North Carolina addresses you have had in the past five years on a separate sheet of paper. Include the dates of your residency for each.

Have you ever attended post secondary school outside of North Carolina?  Yes  No

Have you ever worked outside of North Carolina?  Yes  No

Your last address outside North Carolina \_\_\_\_\_  
Address City State Zip Dates of residency

Do you have a driver's license?  Yes  No Issuing State: \_\_\_\_\_ Date issued: \_\_\_\_\_

Do you own a motor vehicle?  Yes  No State of registration: \_\_\_\_\_

Are you a registered voter?  Yes  No State of registration: \_\_\_\_\_

Your current employer: \_\_\_\_\_  
Employer's Name Address (city, state, zip) Your job title Date of hire

On a separate sheet, please list any other jobs you have held in the past five years. Include employer's name, address, your job title, and dates of employment.

Have you applied at any time to any UNCP office to be classified for tuition purposes?  Yes  No

If yes, were you classified as a  Resident  Non-resident Effective: \_\_\_\_\_  
Term (semester) Year

Please review the information you have provided for "Part 2" and, if appropriate, "Part 3" very carefully to ensure that it is complete and accurate.

You must notify the Graduate School office, in writing, of any criminal charge; any disposition of a criminal charge; or school, college, or disciplinary action against you; or any type of military discharge other than an honorable discharge that occurs at any time after you submit this application. Your failure to do so will be grounds to deny or withdraw your admission, or dismiss you after enrollment.

I understand that my failure to provide complete, accurate, and truthful information on this application, or to notify the Graduate School office of any of the charges indicated above, will be grounds to deny or withdraw my admission, or to dismiss me after enrollment.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\*If there is any question about your NC residency, you will receive a more detailed application form.