CHAPMAN UNIVERSITY

GRADUATE SUPPLEMENTAL APPLICATION FOR ADMISSION

M.S. Communication Sciences and Disorders (ASHA Accreditation: Candidacy Status)

All applicants are required to complete the M.S. in Communication Sciences and Disorders supplemental application as well as the graduate programs application for Chapman University through CSDCAS. Complete all sections of both applications and submit all required supporting documents to: Office of Graduate Admission, One University Drive, Orange, California 92866.

Required supporting documents include official GRE scores. International students are also required to submit official TOEFL or IELTS scores and a financial certification.

Chapman University considers all applicants without regard to race, religion, color, national origin, age, sex, marital status, sexual orientation, special needs, veteran status or any other characteristic protected by applicable state or federal civil rights laws. Some information requested in this application is requested for federal reporting, and will not be used in a discriminatory manner.

Chapman University is committed to assisting all members of the Chapman community in providing for their own personal safety and security. Information regarding campus security and personal safety, including topics such as crime prevention, university public safety law enforcement authority, crime reporting policies, crime statistics for the most recent three year period, and disciplinary procedures, are available from the Public Safety Office, (714) 997-6763.

Please type or print in black ink.

PERSONAL INFORMATION

☐ Male ☐ Female Social Security Number: ☐☐☐ ☐☐☐ ☐☐☐ *(not required for international students)* Date of Birth: ☐☐ / ☐☐ / ☐☐☐☐

Full Legal Name: _____
Last *First* *M.I.*

_____ _____
Other names appearing on previous academic records *Nickname*

Birthplace: _____
City *State and Country*

Phone Number: _____ Cell Phone: _____ E-mail: _____

Degree-Granting Institution	Location (City, State, Country)	Area of Study (Major/Minor)	Dates Attended *From* Month/Year / *To* Month/Year	Degree Awarded
			____/____ ____/____	

PERMANENT ADDRESS	CURRENT ADDRESS (if different from left)
Address:	*Valid* From: / / To: / /
City	*Address:*
State *ZIP Code*	*City* *State* *ZIP Code*
Country	*Country*

TEST SCORES

Please state your GRE scores: Verbal _____ Quantitative _____ Analytical Writing _____

If you have not taken the exam, please indicate the date of your appointment: _____

TOEFL/IELTS Scores *(International Applicants Only)*: Test: _____ Score: _____ Date: _____

FOREIGN LANGUAGES

List the languages you know and rate your proficiency using the following scale: 1 = Fluent 2 = Excellent 3 = Moderate 4 = Minimal

Language	Reading	Speaking	Writing	Years of Formal Training

Certification

I certify that to the best of my knowledge, the information furnished on this application is accurate and complete. I agree that if admitted, I will abide by the rules and regulations of Chapman University as contained in the current Graduate Catalog. If there is a dispute between the university and me, the appropriate catalog will be used as an arbitrating medium. I understand that it is my responsibility to obtain the current Graduate Catalog before or after being admitted to the university.

Applicant Signature _____ Date _____