



SOUTHERN METHODIST UNIVERSITY

Certificate of Advanced Graduate Study

APPLICATION FOR ADMISSION

All responses must be printed or typed.

SMU ID Number*: _____ Application for: (year) _____ Fall _____ Spring _____ Summer _____
*If you do not have an SMU ID number, please provide your social security number.

1. Full Name: _____
Last First Middle

Any other name under which documents may be sent to us or filed

2. Home Address: _____
Street and Number Apt. City State Zip

3. Business Address _____
Street and Number Apt. City State Zip

Employer: _____
Company Name Position

4. Telephone: Home () _____ Office () _____ Mobile () _____

5. Email: _____

6. PERSONAL IDENTIFICATION: Please complete all information

Date of Birth: ____ / ____ / ____ Place of Birth: _____ Gender: Male ____ Female ____
Mo. Day Year

Citizenship (country): _____

*For Non U.S. Citizen Only: If you are a Permanent Resident, please state your alien card identification: A _____
If you are a Non-Immigrant, please state your visa status: _____

Prominent Ethnic Background: Providing this information is voluntary. The information you choose to provide will be used in a nondiscriminatory manner, consistent with applicable civil rights laws, solely for required reporting under federal and/or state laws.

Please check the number that applies to you: ____ 01 American Indian or Alaska Native ____ 05 White, non-Hispanic
____ 02 Asian or Pacific Islander ____ 06 Foreign Student, Temporary Visa
____ 03 Black, non-Hispanic ____ 07 Foreign Student, Refugee Status
____ 04 Hispanic or Mexican-American ____ 08 Unspecified or Other

7. List in chronological order all colleges and universities attended:

Name of Institution	Location	Date of Attendance	Major	Degrees/Date (month/year)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____





SOUTHERN METHODIST UNIVERSITY

Certificate of Advanced graduate study

8. If you have ever been dismissed or suspended from, or denied readmission to any school, please state particulars.

9. Describe your work or professional experience

10. List any academic honors, awards, honorary memberships, publications, and professional presentations relevant to your proposed fields of study (attach separate sheet, if necessary).

11. Please write a 750 word draft proposal that identifies your area of interest, purpose for advanced study, previous study or background knowledge of the topic, and a tentative course of study. This document will be used by the Dean to determine whether your study proposal is appropriate for the program, and upon acceptance will be used as a working proposal for the introductory seminar.

12. How did you hear about the CAGS program?

13. I certify that all information given on this application is accurate:

Signature _____

Date _____

Check to see if you have included the following with this application:

1. ____ Official transcripts in sealed envelopes
(May also be mailed directly to the MLA office from your undergraduate university/college)
2. ____ \$50.00 nonrefundable application fee payable to SMU
3. ____ Draft Proposal

**Mail the completed application to:
Southern Methodist University
Master of Liberal Arts, CAGS
P.O. Box 750253
Dallas, TX 75275-0253**

Southern Methodist University does not discriminate in any employment practice, education program, or educational activity on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. SMU's commitment to equal opportunity includes nondiscrimination on the basis of sexual orientation. The Director of Affirmative Action has been designated to handle inquiries regarding the nondiscrimination policies and may be contacted at (214) 768-3601.