

List all education degrees you have earned:

Institution *Dates of attendance* *Degree(s)*

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List all the certificates and licenses you currently hold:

OPTIONAL INFORMATION

The following information is optional and is requested for use on federal and state reports as well as for institutional research. This information is not used in determining eligibility, nor will it be used in any discriminatory manner.

Spouse _____ Spouse's Position/Employer _____
If applicable Last First

Highest Degree of Spouse: AA BA/BS MA/MS Ph.D. Other

Children _____
If applicable Please include name, age, and grade in school for each child

How did you learn about the graduate programs at Clarke University? _____

Ethnic Origin Native American or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander Caucasian Hispanic or Latino

Gender Male Female Religious Preference _____

CERTIFICATE OF APPLICATION

I hereby certify that the above information is true and that if admitted to the graduate program at Clarke University, I agree to be governed by the regulations, policies and academic standards of Clarke University.

Signed _____

Date _____