

The seal of Valparaiso University is a circular emblem with a rope-like border. Inside the border, the words "VALPARAISO UNIVERSITY" are written in a circular path. In the center, there is a shield with a lamp of knowledge and a book. Below the shield, the year "1859" is inscribed. The Latin motto "VERITAS LIBERABIT VOS" is also visible.

# **VALPARAISO UNIVERSITY**

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## **INTERNATIONAL STUDENT APPLICATION FOR ADMISSION TO THE GRADUATE SCHOOL**

**Kretzmann Hall Room 116  
1700 Chapel Drive  
Valparaiso, Indiana 46383-6493**

**Telephone: 1.219.464.5313  
Toll Free: 1.800.821.7685  
Fax: 1.219.464.5381**

**Email: [Graduate.School@valpo.edu](mailto:Graduate.School@valpo.edu)  
Website: [www.valpo.edu/grad](http://www.valpo.edu/grad)**

We welcome your application for admission to the Graduate School of Valparaiso University. The mission of the Graduate School is to serve the advanced learning, professional development, and personal enrichment needs of individuals nationally and internationally. The Graduate School admits students that demonstrate the ability and motivation to succeed in an academically challenging environment.

## APPLICATION PROCEDURE

This application may be completed electronically through our website at <http://www.valpo.edu/grad>. Please type or print all information in English, except your signature. To be considered for admission, ALL applicants must provide:

- This application form, completed and signed.
- \$50 application fee, through credit card payment, check, or money order drawn on a US BANK ONLY & made payable to Valparaiso University.
- Certified copies of the original and English versions of all your undergraduate and graduate transcripts.
- If English is not your native language, results of TOEFL, or comparable test score, or intent to enroll in Valparaiso University's intensive English program, INTERLINK.
- Two letters of reference submitted by college teachers or academic advisers.
- A reflective essay that explains your reasons for wanting to undertake graduate study at Valparaiso University.
- Provide a **scanned copy** (email to Graduate.School@valpo.edu), **legible photocopy** (by mail), or **fax copy** (219-464-5381), of your passport, clearly showing your full name and date of birth.
- An official statement of financial support from your bank, sponsor, or guardian, certifying the amount of financial support available to you during your enrollment in the Valparaiso University Graduate School.

Applicants providing all of the above information will be reviewed for provisional admission based on their academic qualifications. If admitted provisionally, the applicant must submit the following information before final acceptance is given:

- A certified immunization and health record.

### I. ENROLLMENT PLANS

#### WHICH MASTER'S DEGREE DO YOU PLAN TO SEEK...?

A. Check the program to which you are applying and note the *additional* requirements:

Program	Supplemental Application	Copy of RN License	EXAM
<input type="checkbox"/> MA in Arts & Entertainment Administration			
<input type="checkbox"/> MA in Community Counseling	<input type="checkbox"/>		
<input type="checkbox"/> MA in Clinical Mental Health Counseling	<input type="checkbox"/>		
<input type="checkbox"/> MA in Chinese Studies	<input type="checkbox"/>		
<input type="checkbox"/> MA in English Studies & Communication / TESOL	<input type="checkbox"/>		
<input type="checkbox"/> MA in Liberal Studies (MALS)*			
<input type="checkbox"/> MS in Digital Media	<input type="checkbox"/>		
<input type="checkbox"/> MS in Sports Media	<input type="checkbox"/>		
<input type="checkbox"/> MS in Information Technology & Management	<input type="checkbox"/>		
<input type="checkbox"/> MS in International Commerce & Policy			
<input type="checkbox"/> MS in International Economics & Finance			
<input type="checkbox"/> MS in Nursing – Nurse Educator Concentration	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Doctorate of Nursing Practice (BSN to DNP or Post-MSN)	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> MS in Nursing / Master of Business Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> GMAT
<input type="checkbox"/> MS in Sports Administration			
<input type="checkbox"/> Master of Business Administration (MBA)	<input type="checkbox"/>		<input type="checkbox"/> GMAT
<input type="checkbox"/> Master of Engineering Management (MEM)	<input type="checkbox"/>		<input type="checkbox"/> GMAT or GRE

\*If you checked the MALS degree, please indicate which area of concentration you have chosen:

- English                       Ethics & Values                       Gerontology                       History  
 Human Behavior & Society                       Theology                       Theology & Ministry  
 Individualized (please specify topic area): \_\_\_\_\_

B. Anticipated year/term to begin: 20\_\_\_\_\_  August (Fall)    January (Spring)    May (Summer)

C. In how many years do you plan to complete the program? \* \_\_\_\_\_

\*NOTE: International students must enroll full time for graduate study (3 courses or 9 credit hours minimum/4 courses or 12 credit hours maximum).

## II. PERSONAL INFORMATION

Gender:  Male  Female

Name: \_\_\_\_\_

Family Name	First Name	Middle Name	Former Name
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Mailing Address: \_\_\_\_\_

Number & Street	City	State, Province or Country	Postal Code
Day Phone (circle: home or office)	Cell Phone	Fax Number	
Email		Information Valid Until (Month/Day/Year)	

Permanent Address: \_\_\_\_\_

Number & Street	City	State, Province or Country	Postal Code
Day Phone (circle: home or office)	Cell Phone	Fax Number	
Email		Information Valid Until (Month/Day/Year)	

Citizenship: \_\_\_\_\_

Place of Birth	Date of Birth (Month/Day/Year)
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Permanent Resident of U.S. but not a U.S. citizen   
 Exchange Visitor (J-1)   
 Student (F-1)  
 Will apply for visa if admitted to graduate School   
 Other (Specify): \_\_\_\_\_  
 Non-resident alien (list visa type): \_\_\_\_\_

## III. LANGUAGE PROFICIENCY

A. What is your native or primary language? \_\_\_\_\_

B. Indicate your proficiency in English by checking the appropriate boxes below:

	Very good	Good	Fair	Poor	None
<b>Speaking</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Understanding</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Reading</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Writing</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. Have you taken the TOEFL or a comparable English language test (e.g. IELTS)?

- No    If not, when will you take it? \_\_\_\_\_  
 Yes    If yes, please list the test date and the results. \_\_\_\_\_

D. Where did you study English? (For example, in secondary school, at a University, etc. List locations and dates.)

\_\_\_\_\_

\_\_\_\_\_

E. Do you use English on a regular basis in business, in the classroom, or in social situations? (Give details. Use an additional sheet, if necessary.)

\_\_\_\_\_

F. If English is not your native language, you may attend the intensive English program (INTERLINK Language Center) at Valparaiso University. You may be granted admission into the Graduate School subject to satisfactory completion of the INTERLINK program. Do you wish to receive more information about INTERLINK?  Yes  No

## IV. EDUCATIONAL BACKGROUND

College/University	Location	Dates of Attendance	Degree/Credits Earned
A. _____	_____	_____	_____
B. _____	_____	_____	_____
C. _____	_____	_____	_____

NOTE: Official transcripts of all undergraduate & graduate coursework must be received before you will be allowed to take graduate courses at Valparaiso University.

Please list any recognition, awards, or scholarships that you have received, or co-curricular or community/civic activities in which you have been involved.

Have you ever been dismissed or placed on academic probation at Valparaiso University or another academic institution?

- No  Yes; if yes, please explain fully on a separate sheet.

## V. PROFESSIONAL BACKGROUND AND GOALS (You may include job descriptions or a resume.)

Are you currently employed?  No  Yes; if yes, type of work or profession: \_\_\_\_\_

What are your professional plans, that is, for what occupation are you currently preparing? \_\_\_\_\_

## VI. SELECTION OF VALPARAISO UNIVERSITY

How did you learn about Valparaiso University? (check all that apply)

- College Adviser  Valpo Alumni  Professor  Recruiter  
 Relative/Friend  Religious Organization  Printed Material  Reference Material  
 Internet Site (which site): \_\_\_\_\_  
 Other (please specify): \_\_\_\_\_

Please list other graduate schools in the USA you are considering or to which you are applying:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Order the factor(s) (1 = most important) that will affect your choice for graduate school (rank all that apply).

Reputation \_\_\_\_\_ Program of Study \_\_\_\_\_ Good Value for Cost \_\_\_\_\_ Location \_\_\_\_\_  
Other (please specify) \_\_\_\_\_

## VII. REFLECTIVE ESSAY

All international applicants are required to submit a two-page personal statement or reflective essay indicating their purpose for undertaking graduate study and how this study relates to their professional and personal goals. This statement must be typed double-spaced on separate sheets and submitted with the application materials. Please note that the supplemental application for some degree programs provides further instructions for the personal statement.

The decision for admission to the Graduate School is not final until all required application materials have been received. Applicants granted conditional permission to register for classes due to delayed receipt of official transcripts may not be allowed to begin their coursework if they do not satisfy the admission requirements.

*"I submit this application as a true and complete statement of facts for your consideration."*

\_\_\_\_\_  
**Signature of Applicant Required**

\_\_\_\_\_  
**Date**

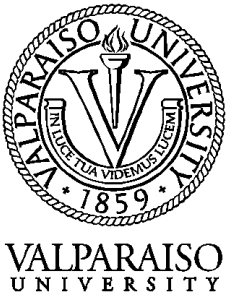
**DO NOT WRITE BELOW THIS LINE. FOR OFFICE USE ONLY.**

APPLICATION APPROVED: \_\_\_\_\_

DEAN'S SIGNATURE: \_\_\_\_\_

APPLICATION DENIED: \_\_\_\_\_

DATE: \_\_\_\_\_



## VALPARAISO UNIVERSITY GRADUATE SCHOOL

### POST-BSN OR POST-MSN / DOCTORATE IN NURSING PRACTICE (DNP) PART II: SUPPLEMENTAL APPLICATION FORM

Specific graduate programs require applicants to submit a supplemental application form along with the basic application. In this supplemental form, you are (1) requested to provide additional information, and/or (2) provided with more specific instructions regarding information requested on the basic application form.

1. NAME: \_\_\_\_\_
2. Three letters of reference: three references from clinical peers/supervisors who attest to communication and clinical competence (VU alumni need only submit two letters of recommendation)  
\_\_\_\_\_  
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#### Summary Checklist

- A bachelor's or master's in nursing from an accredited university with a grade point average of at least 3.25
- Unencumbered Indiana license or eligibility for RN licensure in the State of Indiana
- Copy of all registered nurse licenses
- Certification as an advance practice nurse
- Copy of current APN certification for advanced practice nursing specialty
- Completion of Post-BSN or Post-MSN DNP Application
  - An essay relating doctoral study to your personal and professional goals
  - Submission of a portfolio to include curriculum vita/resume that includes a description of current and past clinical practice as well as any presentations and/or publications
  - Official transcripts of all prior undergraduate and graduate coursework. If you have received an undergraduate or graduate degree from Valparaiso University, you are not required to submit an official transcript from Valparaiso University
  - Letter of recommendation from three clinical peers/supervisors who attest to communication and clinical competence (VU alumni need only submit two letters of recommendation)
  - Interview with the Dean of the College of Nursing and Faculty

#### Application Deadline: April 15

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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#### SEND ALL APPLICATION MATERIALS TO:

Office of the Graduate School, Kretzmann Hall Room 116, 1700 Chapel Drive, Valparaiso University, Valparaiso, IN 46383.

Upon receipt of all admission materials, the Committee on Admissions for the graduate Nursing programs will review the file. The applicant will be notified in writing of the committee's decision. Questions should be addressed to the Graduate School at 219.464.5313 or 1.800.821.7685.