

SEE

LIBERAL ARTS AND SOCIAL SCIENCES DIFFERENTLY

COMBINED BACHELOR'S/MASTER'S PROGRAM

APPLICATION FOR ADMISSION (Please print clearly.)

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. Last Name _____	First _____	Middle _____
Address _____	City _____	State _____ Zip Code _____
Telephone (_____) _____	Email _____	
DePaul ID # _____		
Intended Graduation Term: (bachelor's degree) <input type="checkbox"/> Fall 20 _____ <input type="checkbox"/> Winter 20 _____ <input type="checkbox"/> Spring 20 _____ <input type="checkbox"/> Summer 20 _____		
Current Undergraduate Major _____		
Undergraduate Credit Hours (completed) _____		Undergraduate Credit Hours (in-progress) _____
Cumulative GPA (on a 4.0 scale) _____		Approximate GPA for Major Courses (on a 4.0 scale) _____
Intended Graduate Program:		Applying for Term: (term following completion of bachelor's degree)
<input type="checkbox"/> M.A. in English		<input type="checkbox"/> Fall (Sept.) _____
<input type="checkbox"/> M.A. in sociology		<input type="checkbox"/> Winter (Jan.) _____
<input type="checkbox"/> M.A. in women's and gender studies		<input type="checkbox"/> Spring (March) _____
<input type="checkbox"/> M.A. in writing, rhetoric, and discourse		<input type="checkbox"/> Summer I (June) _____
		<input type="checkbox"/> Summer II (July) _____
<i>Please note that some programs only admit students to the combined degree program who will be starting their senior year in the fall. As such please refer to the program website or contact the academic department for available start terms and application deadlines.</i>		
To the Applicant Please return this form and all required supplemental materials (as indicated on the program website) to the address below: The Office of Graduate Admission DePaul University College of Liberal Arts and Social Sciences 2400 North Sheffield Avenue Chicago, Illinois 60614-2215 Application materials may also be submitted electronically to The Office of Graduate Admission at graddepaul@depaul.edu .		
By signing this form, I submit that this is my own work and that, to the best of my knowledge, the information given above is true. I understand and agree that this application will be invalid if information is withheld or misinformation is given, and that admission and credit earned through an invalid application may be canceled. I understand that all credentials submitted with this application become the property of DePaul University and will not be returned. I understand and agree that DePaul University reserves the right to verify the information contained in this application by, among other things, contacting other educational institutions. If admitted, I agree to notify DePaul University of any changes in my academic standing prior to enrollment and to comply with all rules and regulations of the university.		
Applicant's Signature (Signature required validating application form)		Date _____

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