APPLICATION FOR

Master of Arts in International Studies

For information on Undergraduate, Credential, Colloquy or International Student Admissions, please contact the Admission Office for appropriate application.

UNIVERSITY MISSION STATEMENT

Concordia University Irvine, guided by the Great Commission of Christ Jesus and the Lutheran Confessions, empowers students through the liberal arts and professional studies for lives of learning, service and leadership.

1530 Concordia West, Irvine, CA 92612-3203
Phone: (949) 214-3376 • (800) 229-1200, ext. 3376
Fax: (949) 214-3376
E-mail: gradadmission@cui.edu

WWW.CUI.EDU
Please send application form and requested items to:
Attn: School of Business
MAIS Department
Concordia University
1530 Concordia West
Irvine, CA 92612-3203

To complete your admission file we will need:
1. Completed Application
2. $50 non-refundable application fee
3. Official copies of college/university transcripts
4. Two completed reference forms: downloadable at www.cui.edu/mais
5. Copy of your BA/BS diploma
6. Completed Statement of Intent (form available at cui.edu/mais)
7. Copy of your valid passport
8. Your resumé

Please PRINT or type

Applicant’s name ____________________________________________________________________________________
Last First Middle Maiden

Social Security No. ___________ – _______ – ___________ Semester you plan to enroll at Concordia: Summer

PRESENT MAILING ADDRESS
Street __________________________________________ City _____________________________ State __________ Zip__________

PERMANENT HOME ADDRESS If different from above, specify dates mail should go to this address: _____/____/_____ to _____/____/____
Street __________________________________________ City _____________________________ State __________ Zip__________

Home phone: ( ______ ) _____ - _______ Facebook Email: __________________________________________
Cell phone: ( ______ ) _____ - _______ Twitter Username: __________________________________________
E-mail address: _______________________________________________________________________________________

Please list the best email address for electronic communication between you and the university.

PERSONAL BACKGROUND
Date of birth _________/ ______ / _________

Month Day Year

Sex: [ ] Male [ ] Female Citizenship: [ ] USA [ ] Permanent resident [ ] Other country _____________________________

(Please request an International Student Application.)

Have you been convicted of a felony within the last seven years? [ ] Yes [ ] No

If you wish to identify an ethnic group, please indicate to which group you belong:
[ ] Native American          [ ] Asian or Pacific Islander
[ ] African American        [ ] White (Caucasian)
[ ] Latino/Chicano/Hispanic [ ] Other _____________________________

PROGRAM APPLYING FOR [ ] Master of Arts in international Studies

Will you be applying for financial aid? [ ] Yes [ ] No

RELIGIOUS AFFILIATION
[ ] Lutheran Church – Missouri Synod     [ ] Baptist          [ ] Evangelical Lutheran Church of America
[ ] Non-Denominational Christian          [ ] Methodist      [ ] Presbyterian   [ ] None
[ ] Catholic                           [ ] Other _____________________________

Congregation name ___________________________________________ Pastor’s name ________________________________________

Congregation address ________________________________________

City __________________________________________ State _________ Zip __________ Phone (______) _____________________
PREVIOUS EDUCATION

1. College/University Name ___________________________________________ City ___________________________ State ___________
   Dates attended ___________________________________________________ Units completed at the time of application ______________
   Degree and Date Received __________________________________________ Cumulative GPA (based on a 4.0 scale) ______________

2. College/University Name ___________________________________________ City ___________________________ State ___________
   Dates attended ___________________________________________________ Units completed at the time of application ______________
   Degree and Date Received __________________________________________ Cumulative GPA (based on a 4.0 scale) ______________

3. College/University Name ___________________________________________ City ___________________________ State ___________
   Dates attended ___________________________________________________ Units completed at the time of application ______________
   Degree and Date Received __________________________________________ Cumulative GPA (based on a 4.0 scale) ______________

4. College/University Name ___________________________________________ City ___________________________ State ___________
   Dates attended ___________________________________________________ Units completed at the time of application ______________
   Degree and Date Received __________________________________________ Cumulative GPA (based on a 4.0 scale) ______________

5. College/University Name ___________________________________________ City ___________________________ State ___________
   Dates attended ___________________________________________________ Units completed at the time of application ______________
   Degree and Date Received __________________________________________ Cumulative GPA (based on a 4.0 scale) ______________

(List additional schools attended on a separate sheet.)

NONDISCRIMINATION POLICY

Concordia University does not discriminate on the basis of race, color, national and ethnic origin, sex, or disability in any of its policies, procedures or practices. This includes but is not limited to admissions, employment, financial aid, educational services, programs and activities. Inquiries regarding this policy may be directed to the Vice President of Administration at Concordia University, 1530 Concordia West, Irvine, CA 92612-3203

CERTIFICATION

I certify that to the best of my knowledge the information furnished in this application is true and complete. I agree that if such information, or any information upon which my admission is based, is not true or complete, Concordia University may rescind my degree. I further agree that if admitted, I will abide by the rules and regulations of Concordia University including, but not limited to, those rules contained in the current Concordia University catalog. I acknowledge that all official transcripts which I forward to Concordia University become the property of Concordia University and will not be forwarded to any institution nor returned to me.

I also understand that I am not eligible for financial aid unless I am accepted into a post-baccalaureate or graduate program. I am not eligible to receive financial aid for any courses taken prior to admission to the graduate program.

Applicant’s signature ___________________________ Date ____________