

APPLICATION FOR

Master of Arts in Education

for Bay Area

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) 214-3362 • (800) 229-1200, ext. 3362
Fax: (949) 214-3362
E-mail: gradadmission@cui.edu

WWW.CUI.EDU

Please send application form and requested items to:

Attn: MA. Ed Program
School of Education
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. Two official copies of college/university transcripts from every institution attended
4. Two completed reference forms
5. Completed Admission Essay
6. C&I: Copy of Teaching Credential
Admin: Copy of Teaching Credential, CBEST & Verification Form
PPSC: CBEST & Clearance (Fingerprints)

Please **PRINT** or type

Applicant's name _____
Last First Middle Maiden

Social Security No. _____ - _____ - _____ Semester you plan to enroll at Concordia: **Summer** _____ **Fall** _____ **Spring** _____

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

Gender: 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 Latino/Chicano/Hispanic
 African American White (Caucasian) Other _____

PROGRAM APPLYING FOR

- Master of Arts in Education - Curriculum and Instruction (cohort or online)**
 Master of Arts in Education - Educational Administration with Preliminary Administrative Services Credential
 Master of Arts in Education - School Counseling with Pupil Personnel Services Credential

Will you be applying for financial aid? Yes No

RELIGIOUS AFFILIATION

- Lutheran Church – Missouri Synod Baptist Evangelical Lutheran Church of America Catholic
 Non-Denominational Christian Methodist Presbyterian None 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) _____

(List additional schools attended on a separate sheet.)

CREDENTIAL

California Preliminary Other States Expired Out of State Certification held
 California Professional Clear Current Date _____ Eligible for Out of State Certification

TESTS

CBEST CSET PRAXIS Single Subject SSAT MSAT GRE/MAT
 Date _____ Date _____ Date _____ Date _____ Date _____ Date _____

LETTERS OF RECOMMENDATION

Name _____ Title _____
 Name _____ Title _____

CURRENT PLACE OF EMPLOYMENT

Employer _____ Position and School _____
 Address _____ Phone _____

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

