



Master of Liberal Studies

Application for Admission -

*Please mail all application materials
and application fee to:*

**School of Arts and Sciences
Indiana University Kokomo
2300 S. Washington Street
Kokomo, IN 46902**

Deadline: October 15 for spring semester, April 15 for fall semester

Full Name _____

Last
First
Middle
(Former name)

Social Security Number ** _____ - _____ - _____ Date of Birth _____ / _____ / _____ (mm/dd/yy)

Gender*** _____ Male _____ Female Ethnicity: _____

E-mail Address _____

Current Address _____

Street
City
State or Country
Zip Code

Current Phone Number _____ Work Phone Number _____ Fax Number _____

Are you a US citizen or permanent resident? _____ Yes _____ No

If No, what is your country of citizenship? _____ What type of INS visa do you have? _____

What is your state of legal residence? _____ How long have you lived Indiana? _____

Have you ever attended an IU campus before? Yes _____ No _____

Term you are applying for _____ Fall (August) _____ Spring (January)

List all colleges and universities, in chronological order, that you have attended as an undergraduate or graduate student.

Institution	Dates Attended		Major Subject(s)	Minor Subject(s)	Grade Point Average	Degree and Year Received/Expected
	From	To				

*An application fee of \$40.00 is required of all applicants. Please send check made payable to Indiana University Kokomo with your application.

**In accordance with the Privacy Act of 1974 and Indiana Public Law 22 of 1977, applicants for admission and enrolled students are advised that the requested disclosure of their Social Security numbers is voluntary. Students who do not provide the university with their Social Security number will be assigned a special nine-digit number. This number or the Social Security number will be used a) to identify such student records as applications for admission, registration and course enrollment documents, grade reports, transcript requests, certification requests, and permanent academic records; and b) to determine eligibility, certify school attendance, and report student status. A student who wishes to apply for federal or state grants, loans, and other financial aid programs is required to supply the Social Security number. The student's Social Security number will not be disclosed to individuals or agencies outside Indiana University except in accordance with the Indiana University Policy on Student Records.

*** The policy of Indiana University regarding admission and access to programs prohibits discrimination on the basis of race, color, ethnicity, marital status, sexual orientation, religion, national origin, disability, gender, age, or veteran status. Information gathered concerning these factors will be used for administrative and reporting purposes only. The applicant is not required to answer the question about ethnic origin, and refusal to answer will not affect admission. Any information given by the applicant in answer to this question will be kept confidential.

Please send an official copy of all post secondary transcripts from all institutions you have attended.

GRE Scores (optional) - Date _____ Verbal _____ Quantitative _____ Analytical _____ Subject _____
If yes, please send official GRE results.

Other graduate admission tests (e.g., GMAT, LSAT, TOEFL) and scores _____

Please list titles of any publications, creative work, and unpublished papers presented at conferences.

Please list academic honors you have received and honorary organizations to which you belong.

Work Experience:

Dates of employment	Employer's name and address	Full or part time?
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ESSAY: Because the Program puts so much emphasis upon writing, all applicants must also submit an essay of approximately five hundred words explaining their reasons and expectations for entering the Master of Liberal Studies Program, as well as the strengths they bring to graduate study. The essay also provides an opportunity for applicants to bring any special considerations to the attention of the Graduate Liberal Studies Committee. The essay serves also as a writing sample, and applicants are encouraged to take the time to write clearly and effectively.

RECOMMENDATIONS: Please ask at least two individuals to write letters of recommendation on your behalf. At least one letter should be from a faculty member who can speak to your academic record. List their names below and give each a copy of the recommendation form. You may also want to provide an envelope with the proper address and stamp on it.

Name	Title	Address
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Applicant's Signature

Date

For Department/School Use Only

Department/School _____

Admission Decision (Please check one and answer subsequent questions)

Admit to a Master's Program _____ Yes _____ No

Admit with conditions or deficiencies _____ Conditions or deficiencies _____

Not admitted – Reason (check one)

Application incomplete _____ Low test scores _____ Insufficient preparation _____

Other _____

Term admitted or denied for _____ Fall _____ Spring

Signature of director of graduate studies:

Date



Master of Liberal Studies

Recommendation for Admission

Deadline: October 15 for spring semester, April 15 for fall semester

Mail the completed form to: Dean of the School of Arts and Sciences
Indiana University Kokomo
2300 S. Washington Street
Kokomo, IN 46902

I. APPLICANT: Complete this section.

Applicant Name _____ Degree Sought _____
 Recommender Name _____ Title _____
 Department _____ Institution/Company _____
 City, State, Zip Code _____

The Family Educational Rights and Privacy Act of 1974 opens many student records for the student's inspection. The law also permits the student to sign a waiver relinquishing his or her rights to inspect letter of recommendation. The applicant's signature below indicates the choice.

I hereby waive my right to the information recorded below. OR I do not waive my right of access to the information recorded below.

 Signature of Applicant Date Signature of Applicant Date

II. RECOMMENDER: Under the provisions of the Family Educational Rights and Privacy Act of 1974, this applicant (if admitted and enrolled) will have access to the information provided unless he or she has waived such access.

After responding to the items below, please comment specifically on the applicant's strengths and limitations for graduate study. You may use the other side of this form or attach a letter. Please use a computer or typewriter.

1. How long and in what capacity have you known the applicant? _____
2. Rate the applicant in comparison with the other students you have known at this level (e.g. graduating seniors, M.A. students) in the applicant's discipline. These ratings should complement but not replace your comments on the other side of this form or in your attached letter.

	Truly Exceptional (Top 1%)	Outstanding (Top 5%)	Excellent (Top 10%)	Very Good (Top 25%)	Above Average (Top 50%)	Below Average (Lower 50%)	Unable to Comment
Intellectual potential							
Ability to plan and conduct research							
Creativity and originality							
Knowledge in chosen field							
Ability to work independently							
Motivation for graduate study							
Overall potential for graduate study							

3. Indicate the strength of your overall endorsement by placing an "X" along the following scale:

Highly recommended _____ Recommended _____ Recommended with some reservations _____ Not recommended _____

 Signature Date