

### Checklist for Admission to Graduate Study

## William Carey University

Hattiesburg/Biloxi, Mississippi

Please use this checklist as a reminder.

### Documents required for ALL programs:

- ☐ **Application**: Complete the attached form and mail it with a non-refundable \$40.00 application fee.
- ☐ **Official Transcripts**: Request that official transcripts of credits be sent directly to the Office of Graduate Admissions. Transcripts must be *mailed directly* from all schools attended. Hand delivered transcripts are not acceptable.

### for Admission: Fall 2020 .....Aug. 18 Winter 2020 ......Nov. 3 Spring 2021 .....Feb. 16 Summer 2021......May 26

Fall 2021.....Aug. 17

**Application Deadlines** 

☐ **Recommendations**: Recommendations must be completed by at least two persons familiar with the applicant's abilities, but not family members. The forms must be sent to the Office of Graduate Admissions. They may be either mailed to the address at the bottom or emailed to graduateadmissions@wmarey.edu.

In addition to the above documents, see the following page for requirements of each program.

All documentation **must** be sent to:

**Graduate Admissions** Office, WCU Box 155 William Carey University 710 William Carey Parkway Hattiesburg, MS 39401

If any documentation is sent to other university addresses, it could delay the review of the application.

> For additional information, please see our website at www.wmcarey.edu

#### **WILLIAM CAREY UNIVERSITY - CONSENT FORM**

Pursuant to the terms and conditions of the European Union General Data Protection Regulation 2016/679 (hereinafter "GDPR"), your signature provides consent to William Carey University ("WCU"), in its capacity as Data Controller, to the processing of Personal and/or Sensitive Data, and acknowledgement of the following:

1. The personal data concerning you will be provided to WCU and will be processed for the following
purposes (check all that apply): marketing; _X communicating University information; soliciting donations; research; _X admissions; employment; _X_ student support; _X_ educational purposes; _X_ student account/financial aid; missions/study abroad; athletics; recruiting; and/or other (include
X student support: X educational purposes: X student account/financial aid:
missions/study abroad; athletics; recruiting; and/or other (include
detailed description of the use of personal data):
2. Data refers to any information concerning a natural person that is created by or provided to WCU from or concerning students, applicants, employees, alumni, donors, and/or research subjects. Sensitive data is defined as race, ethnic origin, religious or philosophical beliefs, health data, sexual orientation, and criminal convictions.
3. Data processing will take place either within the offices of WCU or within a third party provider under contract with WCU. The third party provider is contractually obligated to keep your personal data confidential subject to appropriate safeguards to prevent unauthorized disclosure.
${\bf 4.\ Your\ personal\ data\ will\ be\ transferred\ out\ of\ the\ European\ Union\ to\ William\ Carey\ University\ located\ in\ the\ United\ States.}$
5. Your personal data will be stored in accordance with the record retention requirements applicable to William Carey University, and any other applicable U.S. laws. Under the EUGDPR, you have the right to request access to, rectify, erase and/or restrict the processing of your personal data. You also have the right to revoke this consent to use your personal data. If you feel the University has violated the EUGDPR, you have the right to file a complaint with the appropriate EU supervisory authority. These rights are more specifically described in the Privacy Notices posted on the University website at www.wmcarey.edu.
Having read this notice provided by WCU, the undersigned, hereby consents to William Carey University, or any third party provider under contract with WCU, using my personal data for the purposes described in this consent and understand that I can withdraw my consent at any time.
□ gives consent □ does not give consent
Name of Individual:
Signature:
Address of Individual:
Date of Signature:

### **Additional Requirements Checklist**

In addition to the documents listed on the preceding page, the following are needed for each program below:

■ MASTER OF ARTS IN ENGLISH or HISTORY degree program □ Official GRE scores □ Critical writing sample □ 3 letters of recommendation in narrative	■ MASTER OF SCIENCE IN BIOLOGICAL SCIENCE degree program □ Official GRE scores
format	■ MASTER OF SCIENCE IN COUNSELING PSYCHOLOGY program GRE or Miller's Analogy Test (MAT)
■ MASTER OF BIOMEDICAL SCIENCE PROGRAM*	
<ul> <li>MCAT preferred; GRE accepted</li> <li>2 letters of recommendation in narrative format (science professionals, preferably academic faculty)</li> <li>One-page personal statement</li> <li>* Application deadline is July 1, 2018 for admission</li> </ul>	■ MASTER OF SCIENCE IN COUNSELOR EDUCATION program □ GRE or Miller's Analogy Test (MAT) □ Statement of professional goals □ Current resume □ Counselor education informed consent form
■ MASTER OF BUSINESS ADMINISTRATION degree program  Official GMAT scores	All graduate nursing programs admit biannually and are accepting applications for 2018-19 in fall and spring trimesters.
MASTER OF EDUCATION and MASTER OF	MASTER OF SCIENCE IN NURSING
ARTS IN TEACHING degree programs.  M.Ed. Seeking a master's degree or an add-on: ☐ Teacher's certificate Seeking a master's degree in I.A.A.: ☐ GRE test scores	program  ☐ Unencumbered Mississippi RN license ☐ Current resume ☐ Statement of professional goals with specialty track selection stated: Case Management, Gerontology, Healthcare Simulation Education, Nursing
M.A.T. Seeking alternate route: ☐ Praxis (with passing grade) ☐ Praxis II (with passing grades)	Administration, or Population Focused Nursing
☐ Temporary License if available	■ MSN-MBA program (dual-degree) □ Unencumbered Mississippi RN license □ Current resume
■ MASTER OF MUSIC IN MUSIC EDUCATION degree program □ Teacher's Certificate (provide a copy) or □ Praxis I (with passing grade) □ Praxis II (Music and PLT with passing grade)	☐ Statement of professional goals ☐ Official GMAT scores



### William Carey University

### **Application for Graduate Admission**Office of Graduate Admissions

Office of Graduate Admissions
WCU Box 155 • 710 William Carey Parkway • Hattiesburg, MS
39401 (601) 318-6774

Please print using black ink.    Mrs.   Mrs.		
Age Place of Birth   Social Security #		e print using black ink.
Business Telephone	Mrs. J <b>ame</b> Ms.	Social Security #
	resent Address	_
Age Place of Birth	city state county	Business Telephone
ex: _M _F Marital Status: _Single _Married _Divorced _Separated _Widowed Veteran: _YesNore you a U.S. citizen?YesNo _If no, alien registration number	-mail Address	Cellular Telephone
ex: _M _F Marital Status: _Single _Married _Divorced _Separated _Widowed Veteran: _YesNore you a U.S. citizen?YesNo _If no, alien registration number	ate of Birth/ Age	Place of Birth
Ist Name    First Name   Middle Initial	ex:MF	riedDivorcedSeparatedWidowed <b>Veteran:</b> Yes No
By supplying this information, I confirm that this person has provided consent for me share their personal data with William Carey University		iddle Initial
Stadent Signature  On which campus will you attend? Hattiesburg  irst classes will be taken: Fall 20 Winter 20 Spring Trimester 20 Summer Trimester 20  lave you ever been convicted or pled guilty to a crime (other than minor traffic violations)?YesNo  If yes, explain:  lave you been suspended or expelled from another institution?YesNo		
lave you been suspended or expelled from another institution?YesNo	irst classes will be taken: Fall 20Win	g  tter 20Spring Trimester 20Summer Trimester 20  (other than minor traffic violations)?YesNo
	ii yes, expiani.	
	lave you been suspended or expelled from another ins	titution? Yes No
	•	

### Check the appropriate concentration that you are seeking:

MASTER OF ARTS—M.A.			MASTER OF SCIENCE—M.S.		
in English	(	)	Biological Science ( <i>Hattiesburg only</i> )	(	)
in History	(	)		(	`
(Hattiesburg only for both)			Licensure/Certification only (also check area below)	(	)
			Counseling Psychology:		
MASTER OF BUSINESS			Child/Adolescent Therapy	(	)
ADMINISTRATION—M.B.A.	(	)	Christian Counseling	(	)
			Counseling (LPC)	(	)
MASTER OF BIOMEDICAL			Gerontology	(	)
SCIENCE—M.B.S.	(	)	School Counseling	(	)
(Hattiesburg only)			School Psychometry	(	)
			Tradition Only:		
MASTER OF EDUCATION—M.ED	)_		Counselor Education	(	)
WHO TEN OF EDUCATION WHED	•		Clinical Mental Health Counseling	(	)
Alternate Route (MAT) – Elementary	(	)	School Counseling	(	)
Alternate Route (MAT) – Secondary Field	(	)	School Counselling		
Art Education	(	)			
Elementary Education	(	)	MASTER OF SCIENCE	(	`
Interscholastic Athletic Administration	(	)	IN NURSING—M.S.N.	(	)
Secondary Education	(	)	Case Management	(	)
			Gerontology	(	)
Hattiesburg Only:			Healthcare Simulation Education	(	)
Biology	(	)	Nursing Administration	(	)
English	(	)	Population Focused Nursing	(	)
Mathematics	(	)			
Social Sciences	(	)	M.S.N. – M.B.A.	(	\
Gifted	(	)	WI.5.IN. – WI.B.A.	(	)
Mild/Moderate Disabilities	(	)			
MASTER OF MUSIC—M.M.					
in Church Music	(	)	WILLIAM CAP	<u>REY</u>	_
in Music Education	(	)	UNIVERSI	T	Z
(Hattiesburg only for both)					

#### **COLLEGES ATTENDED**

Please list all colleges, including William Carey. **An official transcript from each college attended is required**. Failure to list complete and accurate information at the time the application is submitted could result in the **cancellation** of your enrollment.

Name and Location of Institutions Attended (most recent first)	(From)	Dates of Attendance (To)	(GPA)	Degree Granted	Name While In Attendance
Java you taken the National Teachers	vamination o	u Dunavio?	No	Voc	
lave you taken the National Teachers E	xammation of	r rraxis:		_ res	
re you licensed to teach in Mississippi	? No	Yes	Endo	rsements	
ave you taken the TOEFL exam?	_NoYes	s, date of test_		Score	
ave you taken the GRE?No	Yes, date o	f test	V	erbal score	Quantitative Score
ave you taken the MAT?No	Yes, date o	f test		Score	
ave you taken the GMAT?No	Yes, date o	f test		Score	
ave you taken the MCAT?No	Yes, date o	of test		Score: BS	PS VR
hat was your overall undergraduate gr	ade point ave	rage?			
o you propose to transfer graduate cree yes, check the current William Carey U					
understand that state licensure will be	denied to per	sons who hav	e been con	victed of a felony.	No Yes
st employment activities since graduat	ing from high	school:			
Employer	Location	n	Туре	of Work	Date
ne official transcript must be <i>mailed direc</i>	tlu from each i	nctitution atta	udad boforo	final action may be	o takan an this application
-				•	**
nereby affirm that to the best of my kno	wieuge all info	mauon rufni	snea on thi	s torm is correct a	nu accurate.
Name of Applicant		Da	te		<del></del>

In compliance with federal law, including provisions of Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, and the bylaws of the university, William Carey University does not discriminate against any person on the basis of race, color, national or ethnic origin, sex, gender, age, or disability in admissions or in the administration of its education policies, scholarships, loan programs, athletic and other school-administered rights, privileges, programs, and activities generally accorded or made available to students at the school. The following person has been designated to handle inquiries regarding the non-discrimination policies: Vice President for Academic Affairs, 710 William Carey University, Hattiesburg, MS 39401 (601) 318-6101.



# Confidential Report from Applicant's Reference Graduate Admissions William Carey University

Hattiesburg/Biloxi, Mississippi

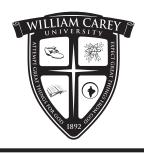
Mr. Ms.			1	1	. 1	1
Mrs(Student, please print your fo	ull name.)	1S	applying for	r admissio	on to gradua	te study a
Villiam Carey University in the field o						
Please fill out this form and return it to	O:					
Graduate Office William Carey University, Box 710 William Carey Parkway Hattiesburg, MS 39401	155 or email to G	raduateAd	missions@wm	icarey.edu		
. How long have you known this	s applicant?		_Years		_Months	
. In what capacity have you know	wn the applican	t? (Can not	be a family n	nember.) _		
In your opinion, what is the application ( ) Definitely master's level ( ) Probably below master's			in graduate ) Probably r ) Do not fee		vel I to judge	
. Do you feel that this applicant's complete graduate work at this						
Is this applicant the kind of per						
	rson you would					
Is this applicant the kind of per	rson you would					
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# Confidential Report from Applicant's Reference Graduate Admissions William Carey University

Hattiesburg/Biloxi, Mississippi

Mr. Ms.			1	1	. 1	1
Mrs(Student, please print your fo	ull name.)	1S	applying for	r admissio	on to gradua	te study a
Villiam Carey University in the field o						
Please fill out this form and return it to	O:					
Graduate Office William Carey University, Box 710 William Carey Parkway Hattiesburg, MS 39401	155 or email to G	raduateAd	missions@wm	icarey.edu		
. How long have you known this	s applicant?		_Years		_Months	
. In what capacity have you know	wn the applican	t? (Can not	be a family n	nember.) _		
In your opinion, what is the application ( ) Definitely master's level ( ) Probably below master's			in graduate ) Probably r ) Do not fee		vel I to judge	
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Is this applicant the kind of per						
	rson you would					
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City

### William Carey University

## HATTIESBURG • BILOXI TRANSCRIPT REQUEST FORM

**NOTE:** This is to be sent to the school you previously attended

NOTE: This is to be sent to	the school you previous	ly attended	
An official transcript is define currently in progress, a supplethose courses.		also is required upon t	he completion of
		Date	
TO WHOM IT MAY CONCE	RN:		
I hereby request that co	opy(ies) of the transcrip	t of:	
Last Name	First	Middle	Maiden
to be sent to:			
Office of G WCU Box 7 710 Willian	n Carey Parkway g, MS 39401		
Date of attendance:			
Social Security Number:	Ε	ate of Birth	
Thank you for your immedia	te attention.		
Signature			
Address		Phone Number	(home)

Zip

State

Phone Number (cell)

### William Carey University 710 William Carey Parkway Hattiesburg, MS 39401

Ph: 1-800-962-5991

### **GDPR Privacy Notice**

William Carey University ("WCU") is committed to safeguarding the privacy of personal data. This Privacy Notice outlines the collection, use, and disclosure of personal data provided to the University by students, faculty, applicants, alumni, donors, research subjects and any and all other individuals disclosing personal data. When data is submitted to WCU, or you use the University's websites and other services, you consent to the collection, use, and disclosure of that data as described in this Privacy Notice.

### University Use of Data

WCU collects and processes data and sensitive data from individuals who are students or applicants only as necessary in the exercise of the University's legitimate interests, functions and responsibilities as a higher education institution. WCU also collects and processes data and sensitive data from individuals who are research subjects in the exercise of scientific, historical research, or statistical purposes. WCU also collects and processes data from individuals who are faculty, staff or applicants for employment positions in order to enter into or administer a contract for employment with the University. WCU also collects and processes data from individuals who are alumni or donors in order to maintain an engaged alumni community, provide notification of services, donations, fundraising, and other University processes and functions. Data is collected and may be shared with internal and external parties to register or enroll persons in the University, provide and administer housing to students, manage a student account, financial aid, provide academic advising, develop and deliver education programs, athletics, support student missions and study abroad programs, track academic progress, analyze and improve education programs, recruitment, athletics, regulatory reporting, auditing, maintenance of accreditation, and other related University processes and functions. WCU also uses data and sensitive data to conduct general demographic and statistical research to improve University programs. Sensitive data is collected, processed and may be shared internally and externally, as necessary, applicable and appropriate, to identify appropriate support services or activities, provide reasonable accommodations, enforce University policies or comply with applicable laws. Finally, data and sensitive data may be shared by WCU with third parties who have entered into contracts with the University to perform functions on behalf of the University, subject to the obligation of confidentiality and safeguarding from unauthorized disclosure.

For purposes of this Privacy Notice, sensitive data is defined as race, ethnic origin, religious or philosophical beliefs, health data, sexual orientation, and criminal convictions.

For purposes of this Privacy Notice, data refers to any other information concerning a natural person that is created by or provided to WCU from or concerning students, applicants, faculty, staff, alumni, donors and research subjects.

### Third Party Use of Sensitive Data

We may disclose your sensitive data and other data as follows:

- **Consent:** We may disclose sensitive data and other data if we have your consent to do so.
- **Emergency Circumstances:** We may share your data, and sensitive data when necessary to protect your interests and you are physically or legally incapable of providing consent.
- **Employment Necessity:** We may share your sensitive data when necessary for administering employment or social security benefits in accordance with applicable law or any applicable collective bargaining agreement, subject to the imposition of appropriate safeguards to prevent further unauthorized disclosure.
- **Legitimate Interest:** We may hold and process data if there is legitimate interest in doing so, provided this interest is balanced against an individual's.
- **Charitable Organizations:** We may share your data with other not-for-profit organizations in connection with charitable giving subject to the imposition of appropriate safeguards to prevent further unauthorized disclosure.
- **Public Information:** We may share your data and sensitive data if you have manifestly made it public.

- **Archiving:** We may share your data and sensitive data for archiving purposes in the public interest, and for historical research, and statistical purposes.
- **Performance of a Contract:** We may share your data when necessary to administer a contract you have with the University.
- **Legal Obligation:** We may share your data when the disclosure is required or permitted by international, federal, and state laws and regulations.
- **Service Providers:** We use third parties who have entered into a contract with the University to support the administration of University operations and policies. In such cases, we share your data with such third parties subject to the imposition of appropriate safeguards to prevent further unauthorized disclosure.
- University Affiliated Programs: We may share your data with parties that are affiliated with the
  University for the purpose of contacting you about goods, services, charitable giving or experiences that may
  be of interest to you.
- **De-Identified and Aggregate Information:** We may use and disclose data in de-identified or aggregate form without limitation.

### Security

We implement appropriate technical and organizational security measures to protect your data when you transmit it to us and when we store it on our information technology systems.

### **Cookies and Other Technology**

The University's use of cookies and other data from information technology can be found in the Online Privacy Notice on the University website.

#### Retention and Destruction of Your Data

Your data will be retained by the University in accordance with applicable state and federal laws, and the applicable retention periods in accordance with the Record Retention Policy adopted by the Board of Trustees of William Carey University. Your data will be destroyed upon your request unless applicable law requires destruction after the expiration of an applicable retention period. The manner of destruction shall be appropriate to preserve and ensure the confidentiality of your information given the level of sensitivity, value and criticality to the University.

### Your Rights

You have the right to request access to, a copy of, rectification of, restriction in the use of, or erasure of your data in accordance with all applicable laws. The erasure of your data shall be subject to the retention periods of applicable state and federal law. If you have provided consent to the use of your data, you have the right to withdraw consent without affecting the lawfulness of the University's use of the data prior to receipt of your request.

Students may exercise these rights by accessing your student account by contacting the University's Registrar, at <a href="mailto:registrar@wmcarev.edu">registrar@wmcarev.edu</a>. Employees may exercise these rights by contacting the Office of Human Resources.

Data created in the European Union will be transferred out of the European Union to the University. If you feel the University has not complied with applicable foreign laws regulating such data, you have the right to file a complaint with the appropriate supervisory authority in the European Union.

### **Updates to This Policy**

We may update or change this policy at any time. Your continued use of the University's website after any such change indicates your acceptance of these changes.