**WEST VIRGINIA STATE UNIVERSITY**

**HEALTH AND HUMAN PERFORMACE DEPARTMENT**

**MASTER OF SCIENCE IN SPORT STUDIES**

**MATERIALS REQUIRED TO COMPLETE APPLICATION:**

**There is an online application process:**

* **APPLICATION FORM:** Complete the Application for Admission hardcopy.
* **STATEMENT OF PURPOSE:** Complete a statement of purpose, explaining aspirations and reasons for pursuing an MSS at WVSU. (500 – 1000 words)
* **RESUME/CURRICULUM VITA:** Submit resume or vita documenting successful professional experiences, community service and professional development.
* **TRANSCRIPTS:** Provide an official transcript from each college or university attended. Graduates of West Virginia State University must provide official WVSU transcripts. Transcripts must be sent directly from the institution.
* **PROFESSIONAL CERTIFICATIONS AND/OR LICENSE:** Provide copy of any/all Professional Certifications or License you may have.
* **LETTERS OF RECOMMENDATION:** Two letters of recommendation are to be included with the application. Address Letters to: Dr. Aaron A. Settle, ATC, CSCS
* **TEST SCORES:** Applicants take the *Graduate Record Exam* OR the *Millers Analogy Test* and have scores sent to the **Masters of Sport Studies Program** at West Virginia State University. If applicable, successful TOEFL scores will also be submitted. (See address on Application)

The successful application will be complete, will demonstrate a coherent statement of purpose aligned with program goals, and will meet these GPA and MAT/GRE requirements:

* A minimum overall GPA of 2.5 on a 4 point scale for all undergraduate work from accredited institution(s) with an MAT score of 350 **or**
* GPA of 2.4 and MAT score of 360 **or**
* GPA of 2.3 and MAT score of 370 **or**
* Exceptional expertise in the field of Exercise Science/Athletic Coaching or Education as demonstrated through an interview with the Graduate Studies Committee.

**STUDENT CATEGORY**

* **Post-Baccalaureate Graduate:** Students who have a Bachelor’s degree from a regionally accredited college or university and are not currently enrolled in a graduate program at another institution of higher education. These students must submit all seven items listed above.
* **Transient Graduate:** Students who have a Bachelor’s degree from a regionally accredited college or university (including West Virginia State University) and **are currently** enrolled in a graduate program at another institution of higher education. Transient Student must submit an application, fee, and transient approval from their current institution of higher education.
* **Non-Degree students:** Students interested in taking specific classes but not enrolling in the degree program must still complete an application and submit fees and transcripts **but need not** submit Statement of Purpose, Resume, Letters of Recommendation or Test Scores. Completed graduate and undergraduate transcripts must be on file and are necessary prior to enrollment. Permission to take courses without enrolling in the degree program may be granted by the Program Coordinator. Non-degree students may not enroll in more than 12 hours of graduate credit without applying for program admission.

**Send ALL Materials to:**

**Dr. Aaron A. Settle, ATC, CSCS**

**West Virginia State University**

**Master of Sport Studies – Program Director**

**P.O. Box 1000**

**N-148 Fleming Hall**

**Institute, WV 25112**

**You may email all material to** [**asettle1@wvstateu.edu**](mailto:asettle1@wvstateu.edu) **(Place: Graduate Program Application Material in the email heading) and mail Official copy of transcripts via U.S. Postal Service to the above address:**

**Application for Admission**

**MASTERS OF SCIENCE IN SPORT STUDIES**

**Graduate Program**

**West Virginia State University**Return to: Dr. Aaron Settle, Graduate Coordinator, Department of Health and Human Performance, WVSU

N-148 Fleming Hall, P.O. Box 1000, Institute, WV 25112

Phone: (304) 766-3367

**(Please complete in blue or black ink)**

**PERSONAL DATA**

Date of application: \_\_\_\_\_\_\_\_\_\_\_ Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ A# (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Address: Street or P.O. Box: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you ever been enrolled in school under any other name(s)? Yes\_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_

If so, please provide full name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a U.S. Citizen? Yes \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_ If not, please indicate immigration status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VISA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Include a copy of both sides of your I-551 card)

**Emergency Contact (Optional).**

(Last, First, Middle): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street or P.O. Box: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_ County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business/Other Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Personal Data** (Disclosure of additional personal data is **optional** and will in no way affect a decision concerning your application.)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_ Birthplace (State): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: Male\_\_\_\_\_\_\_\_\_\_ Female\_\_\_\_\_\_\_\_\_\_\_

Have you ever served in the U.S. Armed Forces? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

Will you be applying for veteran’s benefits? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

**Ethnicity (Optional):**Please check one of the following that best describes your ethnicity:

\_\_\_\_\_\_\_\_\_\_ Hispanic or Latino \_\_\_\_\_\_\_\_\_\_ Asian

\_\_\_\_\_\_\_\_\_\_ Native American Indian or Alaska \_\_\_\_\_\_\_\_\_\_ White

\_\_\_\_\_\_\_\_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_\_\_\_\_\_\_\_ Race/Ethnicity Unknown

\_\_\_\_\_\_\_\_\_\_ Black or African American

\_\_\_\_\_\_\_\_\_\_ Non-Resident Alien \_\_\_\_\_\_\_\_\_\_ Resident Alien

**Enrollment Data:**

Year you plan to enroll: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Term/Semester you plan to enroll: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of Residency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If resident of WV, how long have you lived in WV?

Years: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Months \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Academic History**

College(s) Attended (Undergraduate):

College/University City State Date of Graduation Degree Major

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you been suspended or expelled for academic or disciplinary reasons? Yes \_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_

If you have, are you currently eligible to return to that institution? Yes \_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_

List the two (2) people you have asked to write letters of recommendation. They should be familiar with your educational and/or professional work and be able to evaluate your potential success as a graduate student.

Name Position Email Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Student Category:**

1. \_\_\_\_\_\_ Post-Baccalaureate Graduate 2. \_\_\_\_\_\_ Transient Graduate 3. \_\_\_\_\_\_ Non-Degree Graduate Student

Application checklist **Post Baccalaureate Graduate Student:** (see next page for transient and non-degree students)

I am enclosing/have requested official transcripts from the institutions where my degrees were earned

I am enclosing/have requested official transcripts for any transfer work I would like used toward my   
 graduate degree.

I have enclosed the $28 (resident of WV) or $39 (non-resident) graduate application fee.

I have uploaded/ am enclosing a copy of my professional license and/or certifications

I have completed the statement of purpose.

I have uploaded / am enclosing a resume or curriculum vita.

I have uploaded/ am enclosing/have requested two (2) letters of recommendation.

I have requested an official score report for the MAT **or** GRE general test (and TOEFL, if applicable.)  
 (\*MAT/GRE scores are waived for applicants who already hold a Master’s Degree)

Application checklist **Transient Student:**

I have enclosed the $28 (resident of WV) or $39 (non-resident) graduate application fee.

I have uploaded / enclosed transient approval from my current IHE.

Application checklist **Non-degree Student:**

I am enclosing/have requested official transcripts from the institutions where my degrees were earned

I am enclosing/have requested official transcripts for any transfer work I would like used toward my   
 graduate degree.

**I certify that all statements in this application are complete and true and I give the aforementioned institutions permission to use this information for statistical and reporting purposes. I further understand that any willful misrepresentation of information given in this application may be grounds for denial of my admission or dismissal.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: West Virginia State University adheres to the principles of equal opportunity without regard to race, color, gender, age, creed, national origin or disability. This policy extends to all programs and activities supported by the University.

West Virginia State University, in adhering to its commitment to maintain a safe and tranquil environment and assist the members of the University Community to provide for their own safety, publishes and disseminates information by publishing Crime Statistics for the present and two previous calendar years. For information about crime statistics, please use the link: <http://www.wvstateu.edu/administration/public-safety2.aspx> For additional information, contact a Public Safety representative at (304) 766-3353 or Fax (304) 766-5193 or writing to Department of Public Safety, PO Box 1000, Campus Box 124, Institute, WV 25112-1000.