**MEDIA STUDIES GRADUATE PROGRAM**

**MATERIALS REQUIRED TO COMPLETE APPLICATION:**

♦ **APPLICATION FORM:** Complete the Application for Admission. The application should be typed or printed in black or blue ink and all components returned to:

Media Studies Department, Graduate Program Admissions

Cole Complex Room 201

West Virginia State University

Institute, WV 25112-1000

Fax copies are not acceptable.

♦ **APPLICATION FEE:** There is no application fee.

♦ **STATEMENT OF PURPOSE:** Use the enclosed form or include on a separate sheetand attach to the application.

♦ **TRANSCRIPTS:** Applicants must provide two official transcripts from each college oruniversity attended. Transcripts submitted may be in an unopened, sealed envelope from the institution or may be sent directly from the institution. Graduates of West Virginia State University must also provide official WVSU transcripts.

♦ **LETTERS OF RECOMMENDATION:** The forms can be sent to the applicant ina sealed envelope with the signature of the writer across the seal so that it can be submitted with the application or the form may be sent directly to the Media Studies Graduate Program. Recommendation forms are available in this packet.

♦ **GRE SCORES:** GRE Scores are NOT required for admissions. Applicants who have taken GREs and would like to provide their scores may do so, but this is not required. If submitted, scores should be sent to the Media Studies Graduate Program at the address above.

♦ **INTERNATIONAL APPLICANTS**: Further information for international applicants can be found [here](https://www.wvstateu.edu/international/international-students-application.aspx) (https://www.wvstateu.edu/international/international-students-application.aspx#)

**APPLICANT CATEGORY**

♦ **Post-Baccalaureate Graduate**: Students who have a Bachelor’s degree from aregionally accredited college or university and are not currently enrolled in a specific graduate program.

♦ **Transient Graduate**: Students who have a Bachelor’s degree from a regionallyaccredited college or university (including West Virginia State University and **are** **currently** enrolled in a specific graduate program (e.g., Marshall University’sHumanities M.A., etc.).

♦ **Non-Degree Students**: Students interested in taking specific classes but notenrolling in the degree program must still complete an application **but need not** submit letters of recommendation. 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 Media Studies Program Coordinator. Non-degree students may not enroll in more than 12 hours of graduate credit without applying for program admission.

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**Application For Admission**

**MEDIA STUDIES GRADUATE PROGRAM**

**West** **Virginia State University**

Return to:

Media Studies Department, Graduate Program Admissions

Cole Complex Room 201

West Virginia State University

Institute, WV 25112-1000

Phone: (304) 766-3195



**Personal Data:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Application | | | | | |  | | | | | Social Security Number | | | | | | | |  | | | | | | | | | | | | |
| Last Name | | |  | | | | | | | | First Name | | |  | | | | | | | | | | | | | | | | MI: |  |
| Preferred First Name | | | | |  | | | | | | | | | | Date of Birth | | | | | | | |  | | | | | | | | |
| Current Address: Street or P. O. Box: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| City: |  | | | | | | State: | |  | | | Zip: |  | | | County: | | | | | |  | | | Country: | | | |  | | |
| Home Phone: | | | |  | | | | | | | Business/Other Phone: | | | | | | | | |  | | | | | | | | | | | |
| Email: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Permanent Address (if different): | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Have you ever been enrolled in school under any other name(s)? | | | | | | | | | | | | | | | | | Yes | | | |  | | | | | No | |  | | | |
| If so, please provide full name(s): | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Will you be entering WVSU as an international student? | | | | | | | | | | | | | | Yes | | | |  | | | No | | |  | | |  | | | | |

**Name of Parent, Guardian, Spouse or Other: (Optional:** May be used in case of emergency):

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name (Last, First, Middle): | | | |  | | | | | | Relationship: | | |  | |
| Street or P. O. Box: | | | |  | | | | | | | | | | |
| City: |  | | | State: |  | Zip: | |  | County: | |  | Country: | |  |
| Home Phone: | | |  | | | | Business/Other Phone: | | |  | | | | |
| Email: | |  | | | | | | | | | | | | |

**Citizenship / Immigration Status (Note: Further International Applicant information can be found** [**here**](https://www.wvstateu.edu/international/international-students-application.aspx)**)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Are you a US Citizen? | Yes |  | No |  |  | |
| If no, please indicate | Immigration Status: | | |  | | |
| Visa Type, as applicable: |  | | | Visa Number, as applicable: | |  |

*Please include a copy of both sides of your I-551 card, if you have one.*

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

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Birth: |  | Birthplace (State): | |  | | | Gender: | |  | |
| Have you ever served in the US Armed Forces? | | | | | Yes |  | | No | |  |
| Will you be applying for veteran’s benefits? | | | | | Yes |  | | No | |  |
| *Race and Ethnicity: Please check any of the following to best describe your race and ethnicity:* | | | | | | | | | | |
| Asian | | |  | | White | | |  | | |
| Black or African American | | |  | | Hispanic/Latina/Latino | | |  | | |
| Native American Indian / Alaskan | | |  | | Other | | |  | | |
| Native Hawaiian / Other Pacific Islander | | |  | |  | | |  | | |

**Enrollment Data:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Year you plan to enroll: |  | Term/ Semester you plan to enroll: | |  | |
| State of Residency: |  | | | | |
| If a resident of WV, how long have you (and/or your parent/guardian) lived in WV? | | Years: |  | Months: |  |
| ***Student Category: (choose one)*** | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Post Baccalaureate Graduate |  | Transient Graduate | | |  | Non-Degree Graduate |  |
| ***Anticipated Area of Focus (choose one)*** | | | | | | | |
| Theory and Criticism |  | | Digital Media |  | | Public Health Communications |  |

**Academic History:**

College(s) Attended (Undergraduate):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of College/University** | **City** | **State** | **Date of Graduation** | **Degree** | **Major** |
|  |  |  |  |  |  |
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College(s) Attended (Graduate / Other):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of College/University** | **City** | **State** | **Date of Graduation** | **Degree** | **Major** |
|  |  |  |  |  |  |
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**GRE Scores (Optional:** GRE info is **NOT** required. If included, please have official scores sent)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| I took the GRE in | Month |  | Year |  |  | |
| Scores | Verbal |  | Quant |  | Written Assessment |  |

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

If YES, are you currently eligible to return to that institution? Yes No

**Recommendations:**

List the three (3) people you are asking 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** | **Address** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

**Application checklist:**

* I have included a Personal Statement.
* 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 requested an official score report for the GRE general test (if submitted) and TOEFL (if applicable)
* I am enclosing/ have requested three (3) letters of recommendations.

**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:**



**Equal Opportunity and Non-Discrimination Statement:**

West Virginia State University is an equal opportunity/affirmative action institution and does not discriminate against any person because of race, color, religion, sex/gender, national origin, ancestry, age, blindness, disability, pregnancy, genetic information, sexual orientation, gender identity, veteran or military status or other category that is protected under federal, state, or local anti-discrimination laws as protected characteristics. Further information may be obtained at [https://www.wvstateu.edu/about/title-ix/eeo-aa.aspx](https://www.wvstateu.edu/about/title-ix/eeo-aa.aspx%20) .

**Security Statement:**

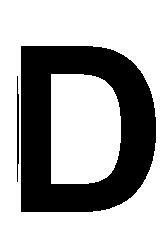
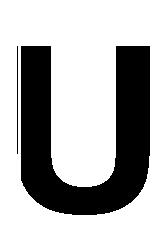
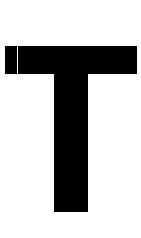
West Virginia State University in adhering to its commitment to maintain a safe and tranquil environment and assist the members of the College Community to provide for their own safety, well-being and security, conducts a variety of seminars, publishes and disseminates information in reference to law enforcement authority, practices and procedures; crime prevention and reporting practices; self-safety techniques; sexual assault and abuse prevention; etc. WVSU complies with the Jeanne Clery Act by publishing Crime Statistics for the present and two previous calendar years. This information can be viewed at <https://www.wvstateu.edu/about/administration/public-safety.aspx>**.**

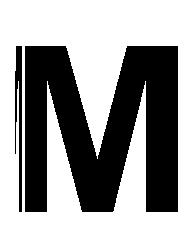
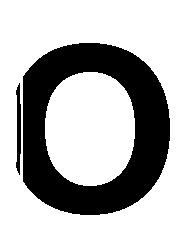
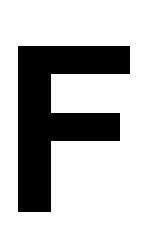
**Statement of Purpose**

Your statement should include your purpose in pursuing graduate study, any research you wish to pursue, and your future career goals. (Please provide in the space below or on a separate sheet of paper).

|  |
| --- |
|  |

**WEST VIRGINIA STATE UNIVERSITY**

**MEDIA**  **GRADUATE PROGRAM**

**RECOMMENDATION** 

Send this form directly to the student in a sealed envelope with your signature across the seal so that the student can return it with the completed application **OR** send it directly to:

**Media Studies Department, Graduate Program Admissions**

**Cole Complex, Room 201**

**West Virginia State University**

**Institute, WV 25112-1000**

1. Name of Applicant:
2. Social Security Number:



To the Applicant:

The Family Privacy Act allows applicants to inspect and review all materials in their files, except for letters of recommendation written prior to 1 January 1975.

Upon its completion and submission, college faculty will utilize this document to evaluate your qualifications to be admitted into the graduate program in Media Studies. It may also be used to assist in the selection of graduate assistants. Before submitting this form to the person who will be writing your recommendations, please check one of the following statements relative to the confidentiality of your files.

|  |  |
| --- | --- |
|  | I DO wish to waive my right to see this document. |
|  | I DO NOT wish to waive my right to see this document. |



|  |  |
| --- | --- |
|  | |
| **Signature of Applicant** | **Date** |



**TO THE PERSON MAKING THIS RECOMMENDATION:**

The above named applicant for admission to the Media Studies Graduate Program has given your name as a reference. The Graduate Program would appreciate your cooperation in providing the following information regarding the applicant's qualifications. References should be acquainted with applicant's academic and/or professional ability.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I have known the applicant for: |  | Semesters |  | Years |
| During this time,  the applicant was a/an: |  | Undergraduate Student |  | Advisee |
|  |  | Graduate Student |  | Departmental Assistant |
|  |  | Employee |  | Other |

Check each line at the appropriate point on the scale to show the applicant's ratings on the characteristics concerned. Use your own student body and recent graduates as a reference group. If the applicant is an employee, use other employees with similar backgrounds as a reference group.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **High** | **Average** | **Low** | **Cannot Judge** |
| **General Intelligence** |  |  |  |  |
| **Knowledge of Field** |  |  |  |  |
| **Maturity** |  |  |  |  |
| **Dependability** |  |  |  |  |
| **Work Ethic** |  |  |  |  |
| **Research Potential** |  |  |  |  |
| **Teaching Potential** |  |  |  |  |

My recommendation for this applicant is:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Very Strong |  | Strong |  | Average |  | Below Average |  | Recommend with Reservations |

(Please explain below)

Please use this space (or a separate sheet on your letterhead) to make comments concerning this applicant's strengths and weaknesses. Comments should pertain to the applicant's ability to undertake graduate studies. Be as specific as possible.

|  |
| --- |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name (Please type or print): | | | |  | | | | Title: | |  | |
| Institution: | |  | | | | | | | | | |
| Address: | |  | | |  | | |  | | |  |
|  | | Street | | | City | | | State | | Zip | |
| **Signature:** | |  | | | | **Date:** | |  | | | |
|  |  |  |  | |  |  |  |  |  |  | |