

16c. **What is your race?** (Mark one or as many races below as appropriate for you.)

(All graduate applicants must respond to Question 16c. If you select "Decline to State," then you cannot choose any other boxes.) The U.S. Census identifies the following races: White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Pacific Islander. These racial categories, as well as many sub-categories, are listed below. You may mark as many races as are appropriate to you. Please mark only one sub-category for each race that you select.

WHITE: (*)

- European
- Middle Easterner
- North African
- Other White _____
Please specify

BLACK or AFRICAN AMERICAN: (*)

- African American
- Black
- Haitian
- Other African/Black _____
Please specify

AMERICAN INDIAN or ALASKA NATIVE: (*)

- Achomawi/Achumawi
- Cahto (e.g., Cahto Indian Tribe of the Laytonville)
- Cahuilla (e.g., Agua Caliente Band of Cahuilla Indians)
- Chemehuevi (e.g., Chemehuevi Indian Tribe of the Chemehuevi Reservation, California)
- Chumash (e.g., Santa Ynez Band of Chumash Mission)
- Costanoan/Ohlone
- Cupeno (e.g., Los Coyotes Band of Cahuilla & Cupeno)
- Gabrielino/Tongva
- Hupa/Hoopa (e.g., Hoopa Valley Tribe, California)
- Karuk (e.g., Karuk Tribe of California)
- Kumeyaay (e.g., Ewiiapaayp Band of Kumeyaay)
- Luiseno (e.g., La Jolla Band of Luiseno Mission)
- Maidu (e.g., Enterprise Rancheria of Maidu Indians)
- Miwok (e.g., Lone Band of Miwok Indians)
- Mojave (e.g., Fort Mojave Indian Tribe of Arizona)
- Ohlone
- Paiute (e.g., Fort Independence Indian Community of Paiute Indians of the Fort)
- Pomo (e.g., Coyote Valley Band of Pomo Indians)
- Quechan (e.g., Quechan Tribe of the Fort Yuma Indians)
- Serrano (e.g., San Manuel Band of Serrano Mission)
- Shoshone (e.g., Paiute-Shoshone Indians of the Bishop Community of the Bishop Colony)
- Tolowa
- Wappo
- Washoe
- Western Mono (e.g., Big Sandy Rancheria of Mono Indians)
- Wintun (e.g., Cachil DeHe Band of Wintun Indians of the Colusa Indian Community)
- Wiyot (e.g., Wiyot Tribe, California/formerly the Table Bluff Reservation - Wiyot Tribe)
- Yokuts
- Yuki
- Yurok (e.g., Yurok Tribe of the Yurok Reservation)
- Latin American Indian
- Other American Indian Tribes _____
Please specify
- Other Alaska Native Tribes _____
Please specify

*(Please select the ONE sub-category that best describes your background.)

ASIAN: (*)

- | | | |
|---|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Indo Chinese | <input type="checkbox"/> Nepalese |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Indonesian | <input type="checkbox"/> Okinawan |
| <input type="checkbox"/> Bhutanese | <input type="checkbox"/> Iwo Jiman | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Burmese | <input type="checkbox"/> Japanese | <input type="checkbox"/> Singaporean |
| <input type="checkbox"/> Cambodian | <input type="checkbox"/> Korean | <input type="checkbox"/> Sri Lankan |
| <input type="checkbox"/> Chinese (except Taiwanese) | <input type="checkbox"/> Laotian | <input type="checkbox"/> Taiwanese |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Malaysian | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Hmong | <input type="checkbox"/> Maldivian | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Other Asian _____ | | |

Please specify

NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER: (*)

- | | |
|--|---|
| <input type="checkbox"/> Carolinian | <input type="checkbox"/> Saipanese |
| <input type="checkbox"/> Chuukese | <input type="checkbox"/> Samoan |
| <input type="checkbox"/> Fijian | <input type="checkbox"/> Solomon Islander |
| <input type="checkbox"/> Guamanian or Chomorro | <input type="checkbox"/> Tahitian |
| <input type="checkbox"/> I-Kiribati | <input type="checkbox"/> Tokelauan |
| <input type="checkbox"/> Kosraean | <input type="checkbox"/> Tongan |
| <input type="checkbox"/> Mariana Islander | <input type="checkbox"/> Yapese |
| <input type="checkbox"/> Marshallese | <input type="checkbox"/> Other Melanesian |
| <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Other Micronesian |
| <input type="checkbox"/> Ni-Vanuatu | <input type="checkbox"/> Other Polynesian |
| <input type="checkbox"/> Palauan | <input type="checkbox"/> Other Pacific Islander _____ |
| <input type="checkbox"/> Papua New Guinean | |
| <input type="checkbox"/> Pohnpeian | |

Please specify

DECLINE TO STATE

*(Please select the ONE sub-category that best describes your background.)

16d. **If the California State University is asked to report only ONE summary race/ethnicity description for you, please choose the ONE category below that you want us to report.**

(All graduate applicants must respond to Question 16d. Please check only ONE box.)

- | | |
|---|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Two or more races/ethnicities |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Decline to State |

17. Print the names and locations of **all** colleges and universities attended, even if no course work was completed. Begin with the last institution attended. Attach a separate sheet if you need more space. For units in progress, see item 18.

Name and Location of Institution	State	Enrolled				Number of Transferable Units Completed		Degree Received	Date (to be) Received								
		From		To		Sem. Units	Qtr. Units		Mo.	Yr.							
		Mo.	Yr.	Mo.	Yr.												
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
		M	M	Y	Y	M	M	Y	Y					M	M	Y	Y
TOTAL																	

18a. List below college courses in which you are currently enrolled and additional courses you plan to complete (including summer school) before entering the CSU. Attach a separate sheet if more space is needed.

Name and Location of Institution	Term/Year (FA/WT/SP/SU)	Department Course Number and Title	Unit Value
	F A 2 0 0 8		
	Y Y Y Y		
	Y Y Y Y		
	Y Y Y Y		
	Y Y Y Y		
	Y Y Y Y		
TOTAL UNITS IN PROGRESS OR PLANNED			

18b. Do you have an RN (registered nurse) license? Yes No

Your responses to the following are required to make a preliminary assessment of your residency status for admission and tuition purposes. The campus may request additional information prior to making a final residence determination.

19. List places you lived **before** your present stay in California began.

From Date	To Date	State or Country	Parent
Y Y Y Y	Y Y Y Y		
Y Y Y Y	Y Y Y Y		

20. What state do you regard as your permanent home?
21. Do you claim California residency? Yes No If "no," proceed to item 26.
22. If you claim California residency, when did your present stay begin?
24. Have you lived in California continuously since birth? Yes No
- 25a. Are you claimed as a dependent on the military record of any active-duty member of the U.S. armed forces? Yes No
- 25b. If you have ever been on active duty in the U.S. military services, enter a Y in box

14. **Academic Honors** (*scholarships, awards, publications*). _____

15. List your first language. _____

Indicate your proficiency in other languages in which you have competence. Rate yourself **E** – Excellent **G** – Good **F** – Fair **P** – Poor

LANGUAGE	READING	WRITING	SPEAKING	LANGUAGE	READING	WRITING	SPEAKING	LANGUAGE	READING	WRITING	SPEAKING
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Years of instruction through the medium of English _____

16. **Test Scores.** List below standardized U.S. graduate admissions tests taken/scheduled: GMAT, GRE, MAT, TOEFL, TWE, NTE, CBEST, etc. Official test report must be sent to the Graduate Admission Office directly from the testing service. Not all CSU programs require test scores.

Test	Date Taken/Scheduled	Scores Received	Date Score Requested
GRE, General		Verbal _____ % Quant. _____ % Analytical _____ %	
GMAT		Verbal <input type="text"/> <input type="text"/> <input type="text"/> Math <input type="text"/> <input type="text"/> <input type="text"/> Analytical Writing <input type="text"/> <input type="text"/> <input type="text"/>	
Others			

17. **TOEFL.** TOEFL scores are required of applicants who have not studied full time for at least three years in environments where English is the language of instruction.

Test	Date Taken/Scheduled	Scores Received
TOEFL (paper version)		
TOEFL (computer version)		
TOEFL Internet (iBT) taken September 2005 or later		

18. List all applicable employment. Include military service but omit summer and part-time work not relevant to your career or academic goal. Indicate your present employer, if now employed.

Employer	Nature of Work	Inclusive Dates

19. List below three faculty members who best know your academic qualifications, including performance, potential, and motivation. If required by the individual program to which you are applying, request that these individuals send letters of reference directly to the department chair or graduate coordinator of the program.

Name	Address	Position and Institution

20. **Statement of Purpose.** Write a brief statement of purpose describing reason(s) for pursuing graduate or postbaccalaureate study. Include any additional information concerning your preparation that is pertinent to the objective specified. Attach an additional sheet if necessary. You may also attach a resumé and/or letters of reference if required by the department.

I certify that the information submitted in this application is true, complete, and accurate. I understand that any misrepresentation will be cause for denial of admission.

Signature _____ Date _____