



## **4+1 Application Form**

Student Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_ OPTIONAL: Race: \_\_\_\_\_ Religion: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Month/Day/Year      M/F      Information for statistical purposes only.      AfricanAm/Asian/PacIsland/      Buddhist/EOrthodox/ Jewish/      S/M/D  
 Caucasian/ Hispanic/NativeAm/other      Protestant/RmCatholic/Muslim/other

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Current Undergraduate Program: \_\_\_\_\_

Concentration: \_\_\_\_\_ Expected Year/Term of Graduation: \_\_\_\_\_

**Please mark the 4+1 Program you are interested in applying for:**

- \_\_\_\_\_ 4+1 Master of Science degree in Organizational Leadership
- \_\_\_\_\_ 4+1 Master of Science degree in Organizational Leadership with a concentration in Accounting
- \_\_\_\_\_ 4+1 Master of Science degree in Criminal Justice Administration

**OFFICE USE**

Program: \_\_\_\_\_

Admit Status: **TZ**

**Fall** (Aug-Dec)    **Spring** (Jan-May)    **Summer** (June-Aug)

### **Course Registration**

DEPARTMENT	NO.	SECTION	CREDIT TYPE*	COURSE TITLE	CREDIT(S) PER COURSE
* U-Undergrad    C-Certificate    A-Audit    G-Graduate    L-Lab    R-Repeat					Total number of credits

\_\_\_\_\_

ADVISOR'S SIGNATURE
STUDENT'S SIGNATURE
DATE

Mercyhurst University Academic Dean Representative: \_\_\_\_\_ Date: \_\_\_\_\_