

APPLICATION FOR READMISSION TO THE PAUL MCGHEE DIVISION AT NYU-SCPS

Instructions: The application form may be completed electronically by clicking on the response fields and typing in your answers. You may then either print your completed application and submit it to the Office of Admissions with all other application components, or you may click on the Submit button at the bottom of the application form to submit the form electronically via e-mail. If you submit the form electronically, it is not necessary to also mail a hard copy of your application, but all other supporting materials must be mailed to the Office of Admissions for your application to be reviewed.

All paper documents, including the application fee, should be mailed to the NYU-SCPS Office of Admissions, 145 Fourth Avenue, 2nd Floor, New York, NY 10003.

A complete application includes the application form, statement detailing reason for withdrawal, and official transcripts from any colleges or universities attended since leaving McGhee. To be eligible for readmission consideration, you must have maintained a minimum GPA of 2.0, have successfully completed at least 50 percent of the credits attempted at McGhee, and meet all other stated requirements of McGhee academic policies and guidelines. Additional information on these policies can be found at scps.nyu.edu/ungergraduate-policies.

Please type or print in ink. Please read the application instructions carefully before completing the following information.

1. LEGAL NAME
 Mr. Ms. _____
Last (Family) First Middle Initial
OTHER NAMES THAT MAY APPEAR ON CREDENTIALS (INCLUDING MAIDEN NAME) _____
2. DATE OF BIRTH ____/____/____ 3. GENDER Male Female
4. COUNTRY OF BIRTH _____ 5. SOCIAL SECURITY NUMBER ____-____-____
If you plan to apply for loans or any type of financial aid, you must include your social security number.
6. PERMANENT HOME ADDRESS (Number and Street) _____ Apt. No. _____
City _____ State/Country _____ Zip/Postal Code _____
Country Code _____ Home Telephone (____) _____ Work Telephone (____) _____
Mobile/Cellular Number (____) _____ E-mail Address _____
7. LOCAL MAILING ADDRESS (IF DIFFERENT) (Number and Street) _____ Apt. No. _____
City _____ State/Country _____ Zip/Postal Code _____
8. PLEASE INDICATE CITIZENSHIP STATUS U.S. Citizen U.S. Permanent Resident Not U.S. Citizen or Permanent Resident
If "Not U.S. Citizen or Permanent," please indicate country of citizenship _____
9. IF NOT A U.S. CITIZEN OR PERMANENT RESIDENT, DO YOU PLAN TO STUDY ON AN F-1 VISA? YES NO
Only students in the one-semester intensive program are eligible to study on an F-1 Visa.
If you are not a U.S. Citizen or permanent resident and you do not need an F-1 Visa, what type of visa will you hold during your studies at NYU? _____
Is English your native language? YES NO If "No," please indicate your primary language. _____
10. RACIAL OR ETHNIC BACKGROUND (optional, for government reporting purposes only)
Do you consider yourself Hispanic or Latino (optional)? YES NO
Please select one or more of the following ethnicities that best describes you (optional):
 American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

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11. FILING STATUS DATE OF ENTRY Fall _____ Spring _____ Summer _____
STATUS Full-time Part-time

12. PLEASE SELECT THE UNDERGRADUATE PROGRAM TO WHICH YOU WISH TO APPLY (SELECT ONE):

Undecided

ASSOCIATE'S DEGREES

- Business (BUSN)
- Diagnostic Medical Sonography (SONO)
- Health Administration (HADM)
- Information Systems Management (ISMA)
- Liberal Arts (LIBA)

BACHELOR OF ARTS DEGREES

- Humanities (HUMN)
Concentrations:
 - Art History (ARH)
 - Creative Writing (CRW)
 - Literature (LIT)
- Social Sciences (SOCS)
Concentrations:
 - Anthropology (ANT)
 - Economics (ECO)
 - History (HIT)
 - International Studies (INS)
 - Media Studies (MST)
 - Organizational Behavior and Communication (ORB)
 - Politics (POS)
 - Psychology (PSY)
 - Sociology (SOC)

BACHELOR OF SCIENCE DEGREES

- Digital Communications and Media (DGCM)
Concentrations:
 - Computer Animation and Visual Effects (AVE)
 - Media Production: Film and Digital Video (MFD)
 - Web Production (WEB)
- Healthcare Management (HSPP)
Concentrations:
 - Community Health/Healthcare Advocacy (CHA)
 - Long-Term Care (LTC)
- Information Systems Management (COTE)
Concentrations:
 - Database Technologies Management (DTM)
 - E-Commerce Management (EMG)
 - Enterprise Systems Management (ESM)
 - Network Management and Security (NMS)
- Leadership and Management Studies (LRMS)
Concentrations:
 - Advertising and Public Relations (APR)
 - Human Resource Management (HRM)
 - International Business (INB)
 - Marketing Management (MKM)
 - Organizational Management and Development (OMD)
 - Technology Management (TEM)
- Real Estate (REBS)

Applicants to the BS in Leadership and Management Studies (*concentrations in International Business, Human Resource Management, and Organizational Management and Development*) or the B.A. in Social Sciences (*concentration in Organizational Behavior and Communication*) who have previously completed 40–64 credits at another regionally accredited college or university may be eligible to complete their degree entirely online.

If you have applied to one of these programs, do you plan to pursue your studies entirely online? YES NO

13. WHEN DID YOU PREVIOUSLY ATTEND MCGHEE? From _____ To _____

Last semester of attendance _____

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14. EDUCATION

SECONDARY SCHOOLS List all secondary schools you have attended (grades 9-12) in chronological order and do not abbreviate.

Name of School	Location (City, State)	Dates Attended (Month/Year-Month/Year)	Date of Graduation (Month/Year)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GENERAL EQUIVALENCY DIPLOMA (GED) STUDENTS

- I received a GED. List GED Score _____ Date GED Awarded (Month/Year) _____
- I do not have a high school diploma or a General Equivalency Diploma (GED).
- I plan to pursue the GED program at NYU.*

**I understand that no financial aid is available for the GED program.*

COLLEGES List all colleges or universities you have attended in chronological order and do not abbreviate.

Name of School	Location (City, State)	Dates Attended (Month/Year-Month/Year)	Number of Credits Earned	Date of Graduation (Month/Year)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

15. ACADEMIC DISMISSAL

HAVE YOU BEEN SUSPENDED OR DISMISSED FROM ANOTHER COLLEGE OR UNIVERSITY WITHIN THE PAST YEAR? YES NO
If yes, please explain.

16. HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO

If yes, please identify nature of conviction, date, and where conviction occurred.

17. HOW DO YOU PLAN TO FINANCE YOUR EDUCATION?

- Employer tuition reimbursement. If yes, is the reimbursement: Full Partial
- Income from employment Student loans Outside scholarship
- Other (specify) _____

Do you plan to apply for financial aid (U.S. Citizens and U.S. Permanent Residents only)? YES NO

If so, you must file the Free Application for Federal Student Aid (FAFSA). Do you have a current FAFSA on file? YES NO

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18. ARE YOU CURRENTLY WORKING? If so, indicate: Full-time Part-time

Industry	Number of years of full-time employment	Employer	Position
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19. DO YOU PLAN TO APPLY FOR ON-CAMPUS HOUSING? YES NO

20. REASON FOR WITHDRAWAL

Please write a brief statement describing your reasons for withdrawing from McGhee and why you are prepared to resume your studies.

21. SUPPLEMENTAL INFORMATION (OPTIONAL)

If you have any additional information you wish to bring to the attention of the admissions committee, please provide it on a separate sheet.

I CERTIFY THAT I have read and understand all instructions accompanying this application and have answered all questions truthfully and to the best of my knowledge. I certify that the information I have provided on this application is complete and correct and that the statement on my reason for withdrawal has been written by me (international applicants are not to have their statement translated from their native language into English by anyone else).

I understand that any misrepresentations or omissions may be cause for denying admission or permission to register at any time. I agree to abide by all New York University rules and regulations. I understand that New York University reserves the right to deny admission or permission to register or require the withdrawal of any student at any time for any reason it considers sufficient, including scholarship, character, and personal conduct. I understand that any items submitted to New York University in conjunction with this application become sole property of the School of Continuing and Professional Studies and will not be returned.

Signed _____ Date _____