Applying for Admission

Application Steps for Master of Arts in Special Education (MASE) Applicants:

1. Complete the entire Graduate Degree Seeking Application thoroughly. An incomplete application cannot be considered and will be returned to the applicant. Please note: the MASE program only admits students for summer semesters, therefore, please indicate a summer start term.

2. Submit the non-refundable application fee of $50. Checks or money orders should be made payable to Belmont University.

3. Submit two recommendation forms - Have two people (non-relatives) complete a recommendation form (enclosed in this application packet).

4. Submit official transcripts, from all colleges and/or universities attended, even those from which transfer credits were received. All official transcripts must be on file with the Office of Admissions before an admissions decision can be made. In addition, applicants with postsecondary course work from foreign institutions must have their transcripts evaluated by a foreign credential evaluation service such as, World Education Services (www.wes.org) or Joseph Silny (www.jsilny.com). The evaluation and all official transcripts must be submitted. Please allow 4-6 weeks for all official transcripts to be received.

5. Submit official test scores from GRE (Graduate Record Examination) or MAT (Miller Analogies Test) test. Test scores must have been earned within the last five years. Please allow 4-6 weeks for official test scores to be received.

6. Submit a one-page letter on why you want to pursue the program.

7. Submit a current resume.

Admissions Requirements

Admission requirements are program specific. For a list of the admissions requirements, please visit the admissions website (http://www.belmont.edu/prospectivestudents/graduate/index.html) and click on the program you wish to view. Applications for admission are also program specific so be sure to download and submit the application of the program to which you intend to apply. You can find a list of program applications at (http://www.belmont.edu/prospectivestudents/graduate/index.html).

International Applicants

1. International applicants whose native language is not English must demonstrate proficiency in the English language by submitting official TOEFL scores (required minimum of 550 PBT or 80 iBT) or by successful completion of ELS Language Center Level 112.

2. International applicants with college level course work from foreign institutions must have their transcripts evaluated by a credential evaluation service such as World Education Services (www.wes.org) or Joseph Silny & Associates (www.jsilny.com).

3. In order to be issued an I-20 for the desired entry term, international applicants must be admitted no later than March 1 in order to enroll for the summer term.
Belmont University
Degree Seeking Application for Graduate Admission

Applicant Information

Term you are applying for ____________________________
Degree you are applying for __________ Master of Arts in Special Education ____________
Program you are applying for _________ Special Education ______________________________
Program Track/Concentration __________ Not Applicable _____________________________
Have you previously applied for admission to Graduate Studies at Belmont University? ☐ Yes ☐ No
If yes, what program? __________ for what term? __________
Have you previously attended Belmont University? ☐ Yes ☐ No If yes, for what term? __________

Personal Data

First Name ___________________________ Middle Name ___________________________ Last Name ___________________________
Preferred First Name ___________________________ Former Last Name (if any) ___________________________
Social Security Number: ___________________________ Email Address ___________________________
Mailing Address Line 1 ___________________________
Mailing Address Line 2 ___________________________
City ___________________________ State/Province ___________________________ Zip/Postal Code ___________________________ Country ___________________________
Home Phone (_____) ___________________________ Work Phone (_____) ___________________________ Cell Phone (_____) ___________________________
Please select your citizenship status ☐ US Citizen ☐ Dual US Citizen ☐ Permanent US Resident ☐ Other
If you are not a US Citizen, please fill out the International Supplement.

The following information is requested for statistical purposes only; completion is optional

Date of Birth MM/DD/YYYY Gender ☐ Male ☐ Female
Are you a US Armed Services Veteran? ☐ Yes ☐ No
Marital Status ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Remarried ☐ Widowed
Religious Preference ___________________________

Ethnic Background: Are you Hispanic or Latino? ☐ Yes ☐ No
Regardless of your answer to the prior question, please check one or more of the following groups in which you consider yourself to be a member.
☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander ☐ White
Education Information

List the names and locations of all colleges/universities at which you have taken courses (including Belmont if you are a former student) and the degrees you have been awarded starting with the most recent. Please attach Additional Education Information Sheet, enclosed in this application packet, if needed. All official transcripts must be mailed directly to the Belmont University Office of Admissions from each institution. In addition, students with postsecondary course work from foreign institutions must have their transcripts evaluated by a foreign credential evaluation service such as World Education Services (www.wes.org) or Joseph Silny (www.jsilny.com).

Institution Attended 1
College/University Name ____________________________
City ____________________________ State/Province _____________ Country ____________________________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): ___________
Degree earned/expected ____________________________ if no degree earned/expected, please leave blank

Institution Attended 2
College/University Name ____________________________
City ____________________________ State/Province _____________ Country ____________________________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): ___________
Degree earned/expected ____________________________ if no degree earned/expected, please leave blank

Institution Attended 3
College/University Name ____________________________
City ____________________________ State/Province _____________ Country ____________________________
Date attended from (MM/DD/YYYY): ___________ to: ___________ GPA earned at this college (on a 4.00 scale): ___________
Degree earned/expected ____________________________ if no degree earned/expected, please leave blank

Employer Information (if applicable)
Employer Name ____________________________ Current Position ____________________________
Address ____________________________
City _____________ State/Province ___________ Zip/Postal Code __________ Country __________
Former Employer Name ____________________________ Position ____________________________
Address ____________________________
City _____________ State/Province ___________ Zip/Postal Code __________ Country __________

In case of emergency, notify the person below
First Name ____________________________ Last Name ____________________________ Relationship ____________________________
Address ____________________________
City ____________________________ State/Province ___________ Zip/Postal Code __________ Country ____________________________
Phone (_____) ____________________________
Background Information

Have you ever been expelled or suspended from any high school or college?

☐ Yes  ☐ No  If yes, please describe in detail:

Have you ever been convicted of (or is any charge now pending against you for) any crime other than a traffic violation?

☐ Yes  ☐ No  If yes, please describe in detail:

References

College of Law applicants are not required to submit letters of reference.

For all other applicants, please list the name and address of two persons who know you (professionally and/or academically) and are willing to address your ability, interest and motivation for pursuing this program. Give each person a recommendation form and instruct them to return it directly to the admissions office. Your application cannot be reviewed until all references have been received.

1.

2.

I certify that all information given is complete and accurate. I understand that my failure to provide complete and accurate information may result in dismissal from the university or other appropriate disciplinary action. If admitted to Belmont University, I agree to abide by the policies and provisions stipulated in the university catalog.

Signature of Applicant ____________________________ Date ____________

For information regarding Belmont University’s campus security record and policies, please contact the Belmont University Office of Safety and Security at (615) 460-6617. In compliance with the Student Right to Know Act, Belmont’s persistence (retention) rates are available at the Institutional Research Office. In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972, Sections 504 of the Rehabilitation Act of 1973, Belmont University does not discriminate on the basis of race, sex, color, national or ethnic origin, age, disability, military service, or sexual orientation in its administration of education policies, programs or activities; its admissions policies; or employment. Under federal law, the university may discriminate on the basis of religion in order to fulfill its purposes. The university has appointed the director of the Office of Human Resources to serve as coordinator of compliance with Title IX. Inquiries or complaints should be directed to the Office of the Provost or the Office of Human Resources.

Visit www.belmont.edu/prospectivestudents/graduate/ in order to confirm individual program requirements. Please forward all materials, including a $50 application fee, to: Belmont University, Office of Admissions, 1900 Belmont Blvd., Nashville, TN 37212-3757, or fax to 615-460-5434.

How did you learn about Belmont University’s Graduate Programs? (please check all that apply)

☐ Academic Advisor  ☐ Advertisement  ☐ Another College/University  ☐ Belmont Alumnus

☐ Belmont Current Student  ☐ Belmont Faculty/Staff  ☐ College Fair  ☐ Employer

☐ Friend  ☐ GRE  ☐ Internet  ☐ Letter or Email from Belmont

☐ Professional Association  ☐ Publications  ☐ Other

Please provide names and/or details for the source checked above:
Belmont University
Additional Education Information

Institution Attended 4
College/University Name ____________________________________________
City __________________________ State/Province _____________ Country ______________
Date attended from (MM/DD/YYYY): _________ to: __________ GPA earned at this college (on a 4.00 scale): ________
Degree earned/expected ________________________________ if no degree earned/expected, please leave blank

Institution Attended 5
College/University Name ____________________________________________
City __________________________ State/Province _____________ Country ______________
Date attended from (MM/DD/YYYY): _________ to: __________ GPA earned at this college (on a 4.00 scale): ________
Degree earned/expected ________________________________ if no degree earned/expected, please leave blank

Institution Attended 6
College/University Name ____________________________________________
City __________________________ State/Province _____________ Country ______________
Date attended from (MM/DD/YYYY): _________ to: __________ GPA earned at this college (on a 4.00 scale): ________
Degree earned/expected ________________________________ if no degree earned/expected, please leave blank

Institution Attended 7
College/University Name ____________________________________________
City __________________________ State/Province _____________ Country ______________
Date attended from (MM/DD/YYYY): _________ to: __________ GPA earned at this college (on a 4.00 scale): ________
Degree earned/expected ________________________________ if no degree earned/expected, please leave blank
# Belmont University
## International Supplement

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Email Address</th>
<th>Date of Birth</th>
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<tr>
<th>Home Phone (____)</th>
<th>Work Phone (____)</th>
<th>Cell Phone (____)</th>
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List any non-US countries of citizenship

List any non-US countries of citizenship

Place of birth

<table>
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<tr>
<th>City/Town</th>
<th>State/Province</th>
<th>Country</th>
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First language

Primary language spoken at home

If you are a Permanent US Resident list your Alien Registration #

If you have another citizenship status list your Visa Type
This section to be completed by the applicant

Applicant's Name ____________________________  First Name ____________________________  Middle Name ____________________________  Last Name ____________________________  
Preferred Name ____________________________  Date of Birth ____________________________ MM/DD/YYYY  
Country ____________________________  Email ____________________________  

Note to Candidate:  
Please enter your name above and deliver one copy of this form to two individuals who will provide you with a recommendation. Under the Family Educational Rights and Privacy Act of 1974, students enrolled at Belmont University have access to their educational records, including letters of evaluation. However, students may waive their right to see letters of evaluation, in which case the letters will be held in confidence. If the applicant has not signed the waiver below, he or she may request to see the recommendation forms after enrolling at Belmont University.  

I hereby □ waive □ do not waive my right of access to this document should I matriculate to Belmont University.  
Signature: ____________________________  Date: ____________________________  

Term you will enter ____________________________  Date: ____________________________  
Degree you are applying for ____________________________  
Program you are applying for ____________________________  
Program Track/Concentration ____________________________  

This section to be completed by the evaluator  
You are completing a recommendation for an applicant to a graduate program at Belmont University. Your assessment is very important to the Admissions Committee, and we greatly appreciate the time and effort on your part in giving us your appraisal of this candidate.  

Name ____________________________  Current Occupation ____________________________  
Current Employer/Organization ____________________________  
Address ____________________________  
City ____________________________  State/Province ____________________________  Zip/Postal Code ____________________________  
Phone (_____) ____________________________  Email Address ____________________________  
How long have you known this applicant? ____________________________  
In what capacity do you know this applicant? ____________________________
Is there any aspect of this applicant’s background that might interfere with successful completion of their graduate study?  
☐ Yes  ☐ No  If yes, please specify: ________________________________________________________________

Please describe those qualifications, traits, or accomplishments you feel are significant in demonstrating the applicant’s ability to complete the program to which he or she is applying: ________________________________________________________________

In what areas do you think the candidate needs the most improvement? ________________________________________________________________

How well do you think the applicant has considered plans for graduate study? ________________________________________________________________

How well do you think the applicant will perform in an environment that stresses a high degree of teamwork, independent thought and action, and personal motivation? ________________________________________________________________

<table>
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<th>Exceptional (Top 5%)</th>
<th>Outstanding (Top 15%)</th>
<th>Above Average (Top 1/3)</th>
<th>Average (Middle 1/2)</th>
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<th>Not Able to Rate</th>
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<tr>
<td>Emotional stability</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Analytical ability</td>
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<td>☐</td>
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<td>Ability to work with others (teamwork)</td>
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<td>Written communication</td>
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<td>Oral communication</td>
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<td>Leadership potential</td>
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<td>Motivation and organization</td>
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<td>Ethical behavior</td>
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<td>Problem Solving</td>
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<td>Intellectual Ability</td>
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</table>

Please complete this section ONLY IF YOU ARE EVALUATING AN APPLICANT FOR GRADUATE STUDY IN MUSIC:

Music Performance Ability | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
Knowledge of music history and theory | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
Aural Skills | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

In regards to this student’s application to graduate study at Belmont University:

☐ Highly Recommend  ☐ Recommend  ☐ Recommend with Reservation  ☐ Do Not Recommend

You may attach any additional comments you feel would help us in assessing this applicant. Please forward this form to: Belmont University, Office of Admissions, 1900 Belmont Blvd., Nashville, TN 37212-3757 or fax to 615-460-5434.

Signature: ___________________________ Date: ___________________________
Belmont University  
Graduate Programs Recommendation Form

This section to be completed by the applicant

<table>
<thead>
<tr>
<th>Applicant's Name</th>
<th>First Name</th>
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<tbody>
<tr>
<td>Preferred Name</td>
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<td>MM/DD/YYYY</td>
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Degree you are applying for

Program you are applying for

Program Track/Concentration

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<td>Current Employer/Organization</td>
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<td>Address</td>
<td></td>
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<tr>
<td>City</td>
<td>State/Province</td>
</tr>
<tr>
<td>Phone (_____ )</td>
<td>Email Address</td>
</tr>
</tbody>
</table>

How long have you known this applicant? 

In what capacity do you know this applicant? 

Is there any aspect of this applicant’s background that might interfere with successful completion of their graduate study?
☐ Yes  ☐ No  If yes, please specify: ____________________________________________________________

Please describe those qualifications, traits, or accomplishments you feel are significant in demonstrating the applicant’s ability to complete the program to which he or she is applying: ____________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

In what areas do you think the candidate needs the most improvement? ____________________________________________________________

____________________________________________________________________________________

How well do you think the applicant has considered plans for graduate study? ____________________________________________________________

____________________________________________________________________________________

How well do you think the applicant will perform in an environment that stresses a high degree of teamwork, independent thought and action, and personal motivation? ____________________________________________________________

____________________________________________________________________________________

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</table>

Analytical ability
☐ ☐ ☐ ☐ ☐ ☐

Ability to work with others (teamwork)
☐ ☐ ☐ ☐ ☐ ☐

Written communication
☐ ☐ ☐ ☐ ☐ ☐

Oral communication
☐ ☐ ☐ ☐ ☐ ☐

Leadership potential
☐ ☐ ☐ ☐ ☐ ☐

Motivation and organization
☐ ☐ ☐ ☐ ☐ ☐

Ethical behavior
☐ ☐ ☐ ☐ ☐ ☐

Problem Solving
☐ ☐ ☐ ☐ ☐ ☐

Intellectual Ability
☐ ☐ ☐ ☐ ☐ ☐

**Please complete this section ONLY IF YOU ARE EVALUATING AN APPLICANT FOR GRADUATE STUDY IN MUSIC:**

Music Performance Ability
☐ ☐ ☐ ☐ ☐ ☐

Knowledge of music history and theory
☐ ☐ ☐ ☐ ☐ ☐

Aural Skills
☐ ☐ ☐ ☐ ☐ ☐

In regards to this student’s application to graduate study at Belmont University:

☐ Highly Recommend  ☐ Recommend  ☐ Recommend with Reservation  ☐ Do Not Recommend

You may attach any additional comments you feel would help us in assessing this applicant. Please forward this form to:
Belmont University, Office of Admissions, 1900 Belmont Blvd., Nashville, TN 37212-3757 or fax to 615-460-5434.

Signature: ___________________________________________  Date: ___________________________
**Belmont University**  
*Graduate Application Fee Form*

<table>
<thead>
<tr>
<th>Applicant's Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
</tr>
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</table>

**Preferred Name** __________________________________________   **Date of Birth** ________________________

<table>
<thead>
<tr>
<th>Program Applying for</th>
<th>Term Applying for</th>
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</thead>
</table>

**Instructions:** The $50.00 non-refundable application fee may be paid by check, money order, or credit card. Check or money orders should be made payable to Belmont University.

**Please indicate your method of payment:**

- [ ] Check (Payable to Belmont University)
- [ ] Money Order (Payable to Belmont University)
- [ ] VISA
- [ ] MasterCard
- [ ] Discover
- [ ] American Express

*If you are paying by credit card, complete the credit card authorization below*

<table>
<thead>
<tr>
<th>Card Number:</th>
<th>Expiration Date (MM/YYYY):</th>
</tr>
</thead>
</table>

**Amount to be charged:** $50.00

*Cardholder's Name: _______________________________*

*Cardholder's Signature: _______________________________*