

Selma University

Office of Admissions and Records
1501 Lapsley Street
Selma, Alabama 36701

GRADUATE APPLICATION FOR ADMISSIONS

Name _____
 First **Middle** **Last** **Maiden (If applicable)**

Current Mailing Address _____
 Street **P. O. Box**

City _____ State _____ Zip _____ County _____

Email Address _____ Home Phone _____ Cell # _____

Emergency Contact _____ Relationship _____ Phone _____

Date of Birth _____ Social Security Number _____

Religious Preference _____ Gender Female Male

Ethnic Type (voluntary):

African American Hispanic
 American Indian Caucasian/White
 Asian Other

Are you a U.S. Citizen? Yes No Are you in active duty Military? _____
Are you a Veteran? Yes No

Have you ever been convicted of a felony? Yes No
If yes, please explain on a separate sheet of paper

Employer Name and Address: _____

Business Phone: _____

Semester of Enrollment: Fall _____ Spring _____
 Year Year

Program of Study: Master of Arts in Religion, Bible and Pastoral Ministry Concentration
 Master of Arts in Religion, Bible and Christian Education Concentration