

# Graduate Application Form

First/Given Name \_\_\_\_\_ Last/Family Name \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Email Address \_\_\_\_\_

## Future Plans

I am applying to be:

A Master's Degree Student

A Doctoral Degree Student

I would like to start my studies in:

2020 Spring

2020 Fall

## Degree

You can only select one, so read the list carefully.

### Newark College of Engineering

<input type="checkbox"/> Biomedical Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Environmental Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Occupational Safety & Health (M.S.)
<input type="checkbox"/> Chemical Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Healthcare Systems Management (M.S.)	<input type="checkbox"/> Pharmaceutical Engineering (M.S.)
<input type="checkbox"/> Civil Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Industrial Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Power & Energy Systems (M.S.)
<input type="checkbox"/> Computer Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Internet Engineering (M.S.)	<input type="checkbox"/> Telecommunications (M.S.)
<input type="checkbox"/> Critical Infrastructure Systems (M.S.)	<input type="checkbox"/> Manufacturing Systems Engineering (M.S.)	<input type="checkbox"/> Transportation Engineering (M.S. & Ph.D.)
<input type="checkbox"/> Electrical Engineering (M.S. & Ph.D.)	<input type="checkbox"/> Materials Engineering (M.S.)	
<input type="checkbox"/> Engineering Management (M.S.)	<input type="checkbox"/> Mechanical Engineering (M.S. & Ph.D.)	

### College of Science and Liberal Arts

<input type="checkbox"/> Applied Mathematics (M.S.)	<input type="checkbox"/> Biology (M.S., Ph.D.)	<input type="checkbox"/> Materials Science (M.S., Ph.D.)
<input type="checkbox"/> Applied Physics (M.S., Ph.D.)	<input type="checkbox"/> Biostatistics (M.S.)	<input type="checkbox"/> Pharmaceutical Chemistry (M.S.)
<input type="checkbox"/> Applied Statistics (M.S.)	<input type="checkbox"/> Chemistry (M.S., Ph.D.)	<input type="checkbox"/> Professional & Technical Communication (M.S.)
<input type="checkbox"/> Applied Science (M.S.)	<input type="checkbox"/> Environmental Science (M.S., Ph.D.)	

### Martin Tuchman School of Management

<input type="checkbox"/> Management (M.S.)	<input type="checkbox"/> Management of Technology (M.B.A.)	<input type="checkbox"/> Business Data Science (Ph.D.)
Specializations:	Specializations:	
• Business Analytics	• Finance	
• Financial Technology	• Healthcare Management	
• Global Project Management	• Information Systems	
• Web Systems and Media	• Innovation & Entrepreneurship	
	• Marketing	
	• Custom	

### Ying Wu College of Computing

<input type="checkbox"/> Business and Information Systems (M.S.)	<input type="checkbox"/> Data Science (M.S.)
<input type="checkbox"/> Computing and Business(M.S.)	<input type="checkbox"/> Information Systems (M.S., Ph.D.)
<input type="checkbox"/> Computer Science (M.S., Ph.D.)	<input type="checkbox"/> IT Administration and Security (M.S.)
<input type="checkbox"/> Cybersecurity and Privacy (M.S.)	<input type="checkbox"/> Software Engineering (M.S.)

### J. Robert and Barbara A. Hillier College of Architecture and Design

<input type="checkbox"/> Architecture (M.Arch)	<input type="checkbox"/> Infrastructure Planning (M.I.P.)
<input type="checkbox"/> Architecture (M.S.)	<input type="checkbox"/> Urban Systems (Ph.D.)

## Biographic Information

Permanent Address

Street 1 \_\_\_\_\_ Street 2 \_\_\_\_\_

City \_\_\_\_\_ State (U.S. only) \_\_\_\_\_

Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Is your Mailing Address the same as your Permanent Address?  Yes  No

Mailing Address (if different from Permanent Address)

Street 1 \_\_\_\_\_ Street 2 \_\_\_\_\_

City \_\_\_\_\_ State (U.S. only) \_\_\_\_\_

Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Valid Until \_\_\_\_\_

Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

On what social media platform can we best reach you? (FB, WeChat, etc.) \_\_\_\_\_

Your username/ID \_\_\_\_\_

For New Jersey Residents

Do you currently reside in New Jersey?  Yes  No

If yes, how long have you lived in New Jersey

Years: (Required For NJ Residents) \_\_\_\_\_ Months: \_\_\_\_\_

What is your citizenship status? \_\_\_\_\_

Country of Birth \_\_\_\_\_

Marital Status \_\_\_\_\_ Gender \_\_\_\_\_

Are you Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture of origin, regardless of race)?  Yes  No

If you answered YES to the above, please indicate how you identify yourself as a Hispanic/Latino.

Please check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Central American (Nicargua, Guatemala, etc.) | <input type="checkbox"/> Cuban  |
| <input type="checkbox"/> Iberian-European (Spanish, Portuguese)       | <input type="checkbox"/> Mexican  |
| <input type="checkbox"/> Puerto Rican                                 | <input type="checkbox"/> South American (Brazil, Venezuela, Argentina, etc) |

Regardless of your answer to the prior question, please indicate how you identify yourself. Check all that apply.

Having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent:

- |   |  |
|---|--|
| <input type="checkbox"/> Asian American                                       | <input type="checkbox"/> Central Asian (Mongolia, Kazakhstan, etc.)      |
| <input type="checkbox"/> East Asian (China, Japan, Korea, etc.)               | <input type="checkbox"/> South Asian (India, Pakistan, Bangladesh, etc.) |
| <input type="checkbox"/> Southeast Asian (Indonesia, Thailand, Vietnam, etc.) |  |

Having origins in any of the original peoples of Central or Southern Africa or the Caribbean:

- African American/Black
- Caribbean (Haiti, Dominican Republic, Barbados, Jamaica, Trinidad, etc.)
- Central African (Congo, Kenya, Uganda, etc.)
- Southern African (Nambia, Madagascar, South Africa, etc.)

Having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands:

- Pacific Islander (Fiji, Guam, Samoa, Tahiti, etc.)
- Native Hawaiian
- Aborigine (Australian or Pacific native)

Having origins in any of the original peoples of Europe, the Middle East, or Northern Africa:

- |   |  |
|---|--|
| <input type="checkbox"/> White American                                       | <input type="checkbox"/> Eastern European (Ukraine, Poland, Albania, etc.) |
| <input type="checkbox"/> Indo-European (Turkey, Azerbaijan, Afghanistan etc.) | <input type="checkbox"/> Middle Easterner (Israel, Jordan, Lebanon, etc.)  |
| <input type="checkbox"/> Northern African (Morocco, Algeria, Egypt, etc.)     | <input type="checkbox"/> Western European (Italy, Sweden, Germany, etc.)   |
| <input type="checkbox"/> Australian, New Zealander (not an indigenous person) |  |

# University/College Education

Name of University/College \_\_\_\_\_ Dates Attended \_\_\_\_\_ to \_\_\_\_\_

Major \_\_\_\_\_ Degree Awarded \_\_\_\_\_

Have you taken the GRE?  Yes  No Date \_\_\_\_\_

Have you taken the GMAT?  Yes  No Date \_\_\_\_\_

# Family

Select your status

Married  Separated  Divorced  Never Married  Widowed  Civil Union/Domestic Partners

Do you have any children?  Yes  No

Number of siblings \_\_\_\_\_

Parent 1

Is parent 1 living?  Yes  No

Prefix \_\_\_\_\_ First/Given Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last/Family Name \_\_\_\_\_

Former last/family/surname (if any) \_\_\_\_\_ Suffix \_\_\_\_\_

Country of birth \_\_\_\_\_ Occupation (former occupation, if retired) \_\_\_\_\_

Education level \_\_\_\_\_

Phone Number (including country code) \_\_\_\_\_ Email Address \_\_\_\_\_

Parent 2

Is parent 2 living?  Yes  No

Prefix \_\_\_\_\_ First/Given Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last/Family Name \_\_\_\_\_

Former last/family/surname (if any) \_\_\_\_\_ Suffix \_\_\_\_\_

Country of birth \_\_\_\_\_ Occupation (former occupation, if retired) \_\_\_\_\_

Education level \_\_\_\_\_

Phone Number (including country code) \_\_\_\_\_ Email Address \_\_\_\_\_

# Citizenship Information

Please provide the following information.

Country of citizenship \_\_\_\_\_

Are you currently in the U.S.?  Yes  No

If Yes, current visa type \_\_\_\_\_

(You must submit copies of your visa, passport, I-20 or DS-2019, green card or any other immigration documents.)

Do you plan to attend NJIT on an F-1 visa?  Yes  No

If you are currently on an F-1 visa, identify the school that issued your original I-20

\_\_\_\_\_

Have you taken the Test of English as a Foreign Language (TOEFL or IELTS)?  Yes  No

(If yes, give the date and have your scores sent to the Office of University Admission.)

TOEFL or IELTS Date \_\_\_\_\_

# Recommendations

Please note that an invitation to submit the letter of recommendation will be sent to the recommenders listed below.

Please prompt the recommender to check his or her email and complete as soon as possible. Please photocopy additional forms as needed.

First/Given Name \_\_\_\_\_ Last/Family Name \_\_\_\_\_ M.I. \_\_\_\_\_

Designation \_\_\_\_\_

Institution/Employer \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_ Phone Number \_\_\_\_\_

Relationship to Student \_\_\_\_\_

First/Given Name \_\_\_\_\_ Last/Family Name \_\_\_\_\_ M.I. \_\_\_\_\_

Designation \_\_\_\_\_

Institution/Employer \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_ Phone Number \_\_\_\_\_

Relationship to Student \_\_\_\_\_

# Agent Details

Are you applying through an agent?  Yes  No

Agency Name \_\_\_\_\_

Name of agency contact \_\_\_\_\_

Contact email address of agent \_\_\_\_\_



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