

A.T. STILL UNIVERSITY
ARIZONA SCHOOL OF HEALTH SCIENCES

ATSU

Masters of Science in Human Movement
Graduate Application for Admission

HOW TO APPLY FOR ADMISSION

Step 1 Complete the enclosed application and return with a non-refundable \$60 processing fee. The **Application Fee Payment Form** is located on page 7. Credit/debit card, check or money order made payable to “A.T. Still University” must accompany the application. Only U.S. currency will be accepted. The application, all supporting documents, and fee must be received by the application deadline.

Return the completed applications by facsimile or mail to:

Online Admissions
A.T. Still University
5850 East Still Circle
Mesa, Arizona 85206-3618
United States
Fax: 480-219-6122

Step 2 An official transcript from the college or university that granted your Bachelor’s degree or equivalent must be provided to the Online Admissions Office. If you have an official copy of your transcript available in a sealed, endorsed envelope, please mail it to the address above under separate cover. If you do not have such an official transcript, ATSU will order it from your college or university, provided you complete the form on page 8. However, if we do not receive your transcript by the 4th week of our request date, it then becomes the student’s responsibility to get official copies to us. Failure to have official transcripts on file may result in removal from courses and/or the inability to register for future coursework with ATSU. Transcripts from additional post-professional or graduate coursework must also be received by Online Admissions in order to award any advanced credits.

STEP 3 Foreign students whose native language is not English and/or graduated from a university where 100% of the instruction was NOT English must demonstrate proficiency by submitting scores of the Test of English as a Foreign Language (TOEFL), administered by the Education Testing Service (ETS). The TOEFL scores must be from the past two years. Any TOEFL exam older than two years must be retaken. Inquiries regarding TOEFL examination dates, locations, and registration should be directed to the Educational Testing Services at +1 609 921-9000, or you may visit the official test website at www.toefl.org. Forward official test scores to the Online Admissions Office by indicating school code 6238. Student copies of the test scores are not considered official but may be used for the purpose of admission only. We must have an official copy on file before you are allowed to begin courses with ATSU. Please allow six weeks for this process.

Step 3 On the last page of the application is the **Provisional Student Financial Plan**. This page is required for admissions into the program. Please mark all payment options you will be using to pay for your classes with ATSU. You must choose a primary form of payment on this form.

Step 4 Submit a resume detailing your personal information, employment, educational background, volunteer experiences, honors, awards, and professional certifications. You may use the MS word resume wizard to create a resume if your resume is not up-to-date.

Step 5 Technology Requirement Form is required for all students. This will outline the minimum requirements for the MSHM program. You must sign the form on page 10 and return with the other application materials. You will not be allowed to begin courses without this document. If you have questions, please contact your advisor.

Step 6 ADP – You are required to fill out and sign the Academic Degree Plan (ADP) for your program of study. This document can be emailed, faxed, or mailed to us. Your application will not be complete without this document. This document will be used to register you in your courses and for billing purposes. No changes may be made to this document without the consent of the Director of the MSHM program.

Step 7 In some cases, A.T. Still University may request letters of recommendation in support of your application for admission. **You will be notified if such letters are required.** If you have any questions, please contact your Online Enrollment counselor for ATSU Online at (U.S./toll-free) 877-469-2878, (Outside the U.S.) 480-219-6118, or by his/her personal email address.

11. Have you ever applied to the Arizona School of Health Sciences? Yes No

If yes, year: _____ Program _____

12. Current Occupation _____

13. Have you had any U.S. military experience? Yes No If yes, branch: _____

*14. Date and type of discharge _____

*15. Were you ever the recipient of any action for unacceptable conduct violations (e.g., dismissal, suspension) from military service? Yes No
Please explain if answer is "Yes" _____

*16. Have you ever voluntarily withdrawn from a health professions program? Yes No

*17. Have you ever been convicted of a misdemeanor or felony (exclude parking violations)? Yes No

STATEMENT OF PAST OR PENDING DISCIPLINARY ACTIONS

18. Have you ever been subject to revocation or suspension of a professional license or been censured, reprimanded, or placed on probation for reasons relating to professional competence or conduct by a state licensing authority? If yes, please explain.
 Yes _____
 No

19. Have you ever had disciplinary action taken against you by any professional society or professional association? If yes, please explain.
 Yes _____
 No

20. Have you ever been subject to disciplinary action for academic or other reason(s) in any colleges, universities, or graduate or professional schools you have attended? If yes, please explain.
 Yes _____
 No

21. Are there any disciplinary charges pending or expected to be brought against you? If yes, please explain.
 Yes _____
 No

22. Is there any information that is relevant to your ability to complete the Arizona School of Health Sciences program and be eligible for licensure or employment that the College should consider? If yes, please explain.
 Yes _____
 No

DEMOGRAPHIC INFORMATION

23. **Are you a U.S. Citizen?** Yes No
- a. **If No, what is your residency status?** Temporary Permanent N/A
- b. **If No, what is your visa type and number?** _____
- c. **If No, what is your country of birth?** _____

24. **How do you describe yourself? (Optional)***
- | | |
|---|---|
| <input type="checkbox"/> Hispanic (of any race) | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White (non-Hispanic) |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Native Hawaiian/Other Pacific Islander |
| <input type="checkbox"/> Two or more races | |

*** The Arizona School of Health Sciences, a School of the A. T. Still University, does not discriminate on the basis of race, color, religion, national origin, sex, gender, sexual preference, age or handicap. Such information on the application form is requested solely for the purpose of gathering and reporting applicant flow data or to confirm information used to process the application.**

Schools/Colleges Attended

A. Transcript requirement. An official transcript from the college or university that granted your Bachelors degree or equivalent must be provided. If you have an official copy of your transcript available in a sealed, endorsed envelope, please mail it to the address above under separate cover. If you do not have such an official transcript, ATSU will order it from your college or university, using the form attached on page 8. You may look up your College Code(s) on the following website:
<http://www.fafsa.ed.gov/fotw0607/fslookup.htm>

B. List all Undergraduate Institutions attended. List all such institutions in order of your attendance.

College Code	Institution	Campus/Location/State	Dates of Attendance	Degree and Date Granted or Expected
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

C. List all Graduate or Professional Schools attended. List all institutions in order of your attendance.

College Code	Institution	Campus/Location/State	Dates of Attendance	Degree and Date Granted or Expected
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

D. List all Certificates of relevancy to your application. List all in order of completion

Certificate Earned	Location/State	Date of Completion	Date of Expiration
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Note: Failure to list all institutions previously attended or degrees pursued may result in loss of credit and dismissal from the program.

I certify that all the statements made in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I know and understand that any or all items contained herein may be subject to verification, and I consent to the full release of all information concerning my capacity and fitness for the educational program by employers, educational institutions, and other agencies. Furthermore, by submitting this application, I agree to abide by the policies and procedures as established in the College catalog, a copy of which is available on the web.

 Signature of Applicant _____
 Date

NOTICE OF NONDISCRIMINATION : Arizona School of Health Sciences, a School of A. T. Still University, does not discriminate on the basis of race, color, religion, national origin, sex, gender, sexual preference, age or handicap in admission or access to, or treatment or employment in, its programs and activities. Any person having inquiries concerning Arizona School of Health Sciences compliance with the regulations implementing Title VI, Title IX, Section 504, or Section 503 is directed to contact the Director of Human Resources, Donna Brown, 800 West Jefferson Street, Kirksville, MO 63501 (telephone: 660-626-2790). The Director of Human Resources has been designated by A. T. Still University to coordinate the institution’s efforts to comply with the regulations implementing Title V I , Title IX, Section 504, or Section 503. Any person may also contact the Assistant Secretary for Civil Rights, U.S. Department of Education, regarding the institution’s compliance with the regulations implementing Title VI, Title IX, Section 504 or Section 503.



Masters of Science in Human Movement

**Transcript Request Form
Please Print**

Registrar, please process this request as soon as possible. If there are any difficulties in processing, please contact Online Admissions at A.T. Still University, at (U.S./toll-free) 877-469-2878, (Outside the U.S.) 480-219-6118, or by email at onlineinquiry@atsu.edu.

_____ Please forward an official copy of my transcript in a sealed, endorsed envelop to Online Admissions, A.T. Still University, 5850 East Still Circle; Mesa, AZ 85206-3618

Name of School: _____

Dates of Attendance- From: _____ To: _____

Degree Earned: _____ Year of Graduation: _____

Student Name: _____

Other Name(s): _____

Birth Date: _____ SSN: _____

Current Student Address: _____

Student Email Address: _____ Daytime Phone Number: _____

Signature of Student*: _____

*** Required for release of transcript under the Family Education Rights and Privacy Act of 1974.**

Provisional Student Financial Plan

Student Name: _____

Employer: _____ Military Status (If Any): _____

Your responses on this form will be provided to the A. T. Still University Office of Financial Assistance and will assist us in responding properly to your ongoing financial assistance requirements. If you have questions regarding specific Financial Assistance topics, you may contact Trisha Riggins in the Office of Financial Assistance at (toll-free) 866-626-2878 Ex. 2529 or financialaid@atsu.edu or may fax materials to 660-626-2926.

ANTICIPATED FINANCIAL ARRANGEMENTS

Circle one or more planned payment methods.

All responses are subject to eligibility, application, and satisfaction of all requirements.

Personal Funding:	Primary	Secondary
Federal Financial Aid:	Primary	Secondary
Military Tuition Assistance	Primary	Secondary
Corporate Tuition Reimbursement	Primary	Secondary
Corporate Direct Bill	Primary	Secondary
Other _____	Primary	Secondary

FEDERAL FINANCIAL AID APPLICATION STATUS

Circle appropriate requests.

Please indicate the status of your application for Federal Financial Aid, if any.

Intend to Utilize Federal Financial Aid:	Yes	No	Undecided
FAFSA PIN Application Complete:	Yes	No	
FAFSA Complete:	Yes	No	
FAFSA Released to A.T. Still University:	Yes	No	

**Masters of Science in Human Movement
Technology Requirement Form
2006-2007**

Windows-based computer:

- Pentium IV or better
- Ethernet/Modem adapter
- 512 MB of RAM
- 40GB hard disk
- CD-R/DVD combo drive
- Windows2000 or XP
- Office 2000 or higher (Word, PowerPoint, Excel) or OpenOffice 2.0 or higher (word processor, spreadsheet application, presentation tool. www.openoffice.org)
- Microsoft Internet Explorer 6 or higher, or Mozilla Firefox 1.5 or higher.
- Internet access via personal Internet Service Provider (ISP) Broadband highly recommended
- Personal printer

Macintosh-based computer:

- G4 microprocessor (900MHz or better)
- Ethernet/Modem adapter
- 512 MB of RAM
- 40GB hard disk
- CD-R/DVD combo drive
- OSX
- Office 2004 or OfficeX (Word, PowerPoint, Excel)
- Microsoft Internet Explorer 5 (Note: After 12/31/05, IE5 is no longer being supported by Microsoft) or Mozilla Firefox 1.5 or higher. (Note: the Safari web browser that ships with OSX is not compatible with WebCT.)
- Internet access via personal Internet Service Provider (ISP) Broadband highly recommended
- Personal printer

I understand I am responsible for providing a computer, which meets the specifications above, prior to enrollment.

Program MSHM

Printed Name _____

Signed Name _____

Date _____