



Graduate Studies Admissions

410-532-5317

Fax: 410-532-5333

CASE inquiries

410-532-5305

Fax: 410-532-5798

E-mail: gradadm@ndm.edu • www.ndm.edu

Please complete and mail with \$45 application fee (check or money order) to:

Office of Graduate Admissions
College of Notre Dame of Maryland
4701 North Charles Street
Baltimore, MD 21210-2404

*300–500 word essay should accompany this form.

I. AUTOBIOGRAPHICAL INFORMATION

Legal name _____
Last First Middle

Permanent address _____
Street City State Zip

Social Security number _____ Date of birth _____

Home telephone () _____ Work telephone () _____

E-mail _____ Cell phone () _____

During which semester do you hope to begin your study at College of Notre Dame of Maryland?

Select one: Fall 20 ____ Winterim 20 ____ Spring 20 ____ Summer 20 ____

Deadline dates: July 5 November 5 December 5 April 5

Citizenship Status

U.S. citizen Yes No Citizenship if other than the U.S. (country) _____

Are you a permanent resident of the U.S.? Yes No What is your U.S. visa status? _____

If not U.S. citizen: Are you a resident alien? Yes No Do you possess a green card? Yes No

Will you need an I-20 (student visa) form? Yes No Is English your second language? Yes No

I understand this information is requested solely for the purpose of determining compliance with the Federal Civil Rights law and my response will not affect consideration of my application.

Gender: Male Female

Are you Hispanic/Latino? Yes No

Race (you can choose one or more categories)

American Indian or Alaskan Native Asian

Black or Non-Hispanic Native Hawaiian or Other Pacific Islander

White

Religion _____

II. DESIRED PROGRAM

Education Programs

Master of Arts in Catholic School Leader/Teacher

Master of Arts in Gifted and Talented Education

Master of Arts in Leadership in Teaching

Certifications

___ Administration and Supervision

___ Administration and Sports Coaching

___ English to Speakers of Other Languages (ESOL)

___ Library Media Specialist

___ Reading Specialist

___ Special Education (Elementary or Secondary)

___ Elementary ___ Secondary

Content Specializations

___ Mathematics for Middle School Educators

___ Science for Middle School Educators

___ Spanish for Middle and High School Educators

Certificate of Advanced Study in Education (CASE)

Post-master's Certifications:

___ Administration and Supervision

___ Library Media Specialist

___ Reading Specialist

___ Teaching English to Speakers of Other Languages (TESOL)

Communication, Liberal Studies, Leadership and Management, Nonprofit Management and Nursing Programs

Master of Arts in Contemporary Communication

Master of Arts in Liberal Studies

Master of Arts in Leadership and Management

Concentrations

- ___ Health Care Administration
- ___ Human Resource Management
- ___ Individualized Specialization
- ___ Information Systems
- ___ Project Management

Master of Arts in Nonprofit Management

Master of Science in Nursing

Concentrations

- ___ Leadership in Nursing Administration
- ___ Leadership in Nursing Education

Certificate in Leadership in Nonprofit Organizations

III. PRIMARY LOCATION FOR STUDY

North Charles Street (Baltimore)

HEAT Center (Harford County)

SMHEC (Southern Maryland)

Arundel Mills (Anne Arundel County)

Other (please indicate) _____

IV. PREVIOUS EDUCATION

Please list all educational institutions that you have attended since high school:

Name of school	City and State	Dates attended	Degree	Major
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				

(Applicant is responsible for having all official transcripts from all colleges attended forwarded to the office of graduate admissions, including official transcripts of any previous postbaccalaureate study.)

Official transcripts of all graduate courses completed in another accredited graduate-level program are required at the time of application. Transcripts must be received by the application deadline in order to be evaluated for transfer credit.

When having your transcripts forwarded, please ask your former institutions to indicate your program of interest at College of Notre Dame.

Would you like for your transcript (completed in another graduate-level program) to be reviewed for possible transfer credit? Yes No

If your previous college transcripts are under a different name, please note your former name(s) _____

V. WORK EXPERIENCE

Selection into a graduate program is based on both academic preparation and professional/life experience. Please attach a résumé OR complete the section below.

Organization	Address	Phone
Position	Dates of employment	
Organization	Address	Phone
Position	Dates of employment	
Organization	Address	Phone
Position	Dates of employment	

