

Master's degree
application



HARDING UNIVERSITY
GRADUATE SCHOOL of RELIGION
Transforming Leaders

Please supply all requested information in the sections that apply to you. Be sure to sign and date Section V. This information is kept confidential.

SECTION I — All applicants

Full name: _____
Last First Middle Preferred

Current address City/State ZIP code Area code Phone number

Permanent address City/State ZIP code Area code Phone number

Business phone: _____ Cell phone: _____
Area code Phone number Area code Phone number

E-mail: _____

Date of birth _____ SSN: _____ Male Female

Ethnic information

This information is voluntary and will be used in a nondiscriminatory manner consistent with applicable civil rights laws.

Ethnic origin: Hispanic Black, non-Hispanic White, non-Hispanic
 Asian/Pacific Islander Native American/Alaskan Native Other

Religious preference/Church membership: _____

Semester you plan to begin at HUGSR: Fall Spring Summer Year 20 _____

Have you ever applied to HUGSR before? Yes No If yes, when? _____

Why do you desire to attend Harding University Graduate School of Religion?

In chronological order, list all schools attended after high school. Attach a separate sheet if necessary.

Name of institution	Location	Dates attended	Degree & date received	GPA
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

An official copy of transcript(s) from schools listed above must be on file at HUGSR before your application is completed.

Major in college Minor(s) in college Honors _____

National information

This information will not be used to determine admission status.

Place of birth _____ Country of citizenship _____

If not a U.S. citizen: 1) What is your visa status? _____

2) SEVP number _____

If you answer YES to any of the following questions, attach a statement giving details.

- a. Has academic or disciplinary action been taken against you at any college you have attended? Yes No
- b. Have you ever been convicted or pleaded guilty to any crime (not minor traffic violations)? Yes No
- c. Have you ever been treated for alcohol/drug abuse or any other type of addiction? Yes No
- d. Do you know of any problem that might adversely affect your admission to this school? Yes No

CONTACT INFORMATION

Father: _____
Name Address City/State ZIP code Phone

Mother: _____
Name Address City/State ZIP code Phone

Emergency Contact: _____
Name Address City/State ZIP code Phone

Relationship to you: _____

REFERENCES

Provide the names and full addresses of four references as described below. The admissions office will send them reference forms. Do not list family members.

Choose one option: I DO I DO NOT waive my right to view completed references.

- | | Name | Address | City/State | ZIP code |
|----|--|---------|------------|----------|
| 1. | _____ | _____ | _____ | _____ |
| | A professor | | | |
| 2. | _____ | _____ | _____ | _____ |
| | A professor | | | |
| 3. | _____ | _____ | _____ | _____ |
| | A businessperson (Counseling applicants, provide a professional counselor as a reference.) | | | |
| 4. | _____ | _____ | _____ | _____ |
| | A minister | | | |

SECTION II — Master of Arts, Master of Arts in Christian Ministry, and Master of Divinity applicants

\$40 APPLICATION FEE REQUIRED

Plans for life's work: _____

Check degree program and concentration:

Master of Arts. Check area of concentration:

Old Testament

New Testament

Apologetics

Historical Theology

Systematic Theology

Master of Arts in Christian Ministry. State your area of concentration, if any:

Master of Divinity. Check area of concentration, if any (check only one): None

Apologetics

Campus Ministry

Church Planting

Counseling

Global Missions

Homiletics

Leadership and
Church Health

New Testament

Old Testament

Systematic Theology

Urban Missions

Worship Ministry

Youth and Family

List churches with which you have been most involved. Attach a separate sheet if needed.

Dates

Church

Location

Involvement

SECTION III — Nondegree programs

\$40.00 APPLICATION FEE REQUIRED

Check nondegree program: Special Student Certificate in Ministerial Counseling

M.Div. Equivalency

SECTION IV — Master of Arts in Counseling applicants

\$150 APPLICATION FEE REQUIRED (includes fees for required testing)

In addition to this application, you must submit an admissions essay (see below), take a set of psychological profiles, and meet with the counseling faculty for an entrance evaluation. To arrange to take the profiles and evaluation, call the admissions office at (901) 761-1356.

List undergraduate courses in counseling and date (list on separate sheet as necessary):

List graduate courses in counseling and date (list on separate sheet as necessary):

M.A. IN COUNSELING ESSAY (to accompany this application)

Please provide a brief autobiography addressing the questions below. Include the essay in your application.

1. What are your reasons for pursuing work in this program at HUGSR?
2. What have been some of the most significant turning points in your life?
3. How have you dealt with any crises that you have encountered?
4. What did you learn about yourself from dealing with these crises?
5. How do you see God preparing you to be a counselor?
6. What doors of opportunity do you hope God will open for you to use your counseling training when you have completed this program?
7. What is there in your current life situation that will be an asset to you in pursuing this degree? What liabilities or difficulties may there be?

SECTION V — All applicants

This application in its entirety (including all pages and any attachments) is true and accurate to the best of my knowledge. By signing this application I agree that, if admitted, I will abide by all of the regulations of Harding University Graduate School of Religion.

Applicant's signature

Date

To complete the application process:

- Complete this application and mail with the appropriate fee.
- Request your undergraduate transcripts be sent to the address below.
- Inform your references so they can expect to be contacted by the admissions office.

Counseling applicants:

- Complete the items listed above.
- Make arrangements to take the psychological profiles by contacting the admissions office by phone or e-mail.
- Interview with the counseling faculty upon receiving the results of the psychological evaluations. The appointment will be set by the admissions office.

PRIORITY APPLICATION DEADLINES

Fall semester: March 1

Spring semester: October 1

Summer: March 1

H A R D I N G U N I V E R S I T Y

GRADUATE SCHOOL *of* RELIGION

**1000 Cherry Road
Memphis, TN 38117**

**(800) 680-0809
(901) 761-1356
Fax: (901) 761-1358**

**www.hugsr.edu
hgsadmissions@hugsr.edu**

HUGSR use only:

Date admitted _____ Admissions chairman _____