

APPLICATION

CALIFORNIA LUTHERAN UNIVERSITY

Doctor of Education in Educational Leadership





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|---------------------------------------------------------------------------------------------------------|------------------|-----------|
| FOR OFFICE USE ONLY: | | By: _____ |
| Admitted: <input type="checkbox"/> Yes <input type="checkbox"/> No | Program Director | |
| <input type="checkbox"/> Full <input type="checkbox"/> Provisional <input type="checkbox"/> Conditional | Date: _____ | |

Application for Admission

Doctoral of Education Programs (Please choose one)

- Ed.D. in Educational Leadership K-12
 Ed.D. in Higher Education Leadership

Persons seeking to pursue graduate study must submit the entire application packet and a non-refundable application fee of \$50.00. Admission policies are described in the Graduate Catalog:

(http://www.callutheran.edu/registrar/documents/3859_3016_Graduate_Catalog_05_07_000.pdf).

Send all admission materials to: Ed.D. Programs, School of Education, California Lutheran University, 60 West Olsen Road, MC 4100, Thousand Oaks, California 91360-2700.

- I AM APPLYING FOR: Full admission as a new doctoral student
 Readmission as a student previously accepted into this program
- YEAR YOU PLAN TO BEGIN STUDIES: Fall 20 _____
- NAME: _____ Female Male
Last First Middle Former
- HOME ADDRESS: _____
Number and Street Apartment Number
City State/Province Postal/Zip Code Country
- PERMANENT ADDRESS (If different from above) _____
- HOME PHONE _____ 6. WORK PHONE _____ 7. CELL PHONE _____
- BIRTHDATE _____ 9. BIRTHPLACE _____
- SOCIAL SECURITY # _____ 11. E-MAIL ADDRESS _____
- EMPLOYER (if any) _____
Name Address City State Zip Code
- JOB TITLE _____
- COLLEGES ATTENDED: List bachelor's degree(s) and master's degree(s), including study at CLU

| Name and Location of School | Dates Attended | Degree | Graduation Date |
|-----------------------------|----------------|--------|-----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

- I HOLD THE FOLLOWING CREDENTIALS:

| TITLE | STATE |
|----------|-------|
| a. _____ | _____ |
| b. _____ | _____ |
| c. _____ | _____ |
| d. _____ | _____ |

- WHAT PROMPTED YOU TO APPLY TO CLU'S ED.D. PROGRAM? _____

- RELIGIOUS AFFILIATION: (California Lutheran University utilizes responses regarding religious affiliation for institutional research and federal reports only. Your responses are optional and will in no way affect your admissibility to CLU) AME Catholic Islamic Methodist Orthodox
 Baptist Episcopalian Jewish Mormon Other
 Buddhist Hindu Lutheran Presbyterian None

- ETHNIC/RACIAL HERITAGE: (California Lutheran University utilizes responses regarding ethnic/racial heritage for institutional research and federal reports only. Your responses are optional and will in no way affect your admissibility to CLU) African American Asian American International Multiracial
 Alaskan Eskimo/Native American Caucasian Latino/Hispanic Pacific Islander

COUNTRY/COUNTRIES OF CITIZENSHIP – If you are NOT a U.S. citizen, please complete the following:
I am in the U.S./will be entering the U.S. as a:
 Permanent Resident Visa holder
Alien registration number _____
OR
 F-1 student (Using form I-20) Other (Please specify) _____
If already in the U.S., please list your date of entry: _____
Month/ Date/ Year

NOTE: International Students must also fill out the international application. Download the application at the following link: <http://www.callutheran.edu/intlapplication>.

- Have you ever been placed on academic or disciplinary probation, or had any other penalty imposed? Yes No
- Have you even been convicted of a crime? (A conviction is not necessarily disqualifying. Each case will be evaluated on its own merits and applicability to the person.) Yes No
- If you answered yes to either question 19 or 20, please attach a sheet explaining the circumstances, including conviction date and place.

I understand that it is my responsibility to arrange meetings with a University Advisor to plan my graduate program. Although advisors will assist in planning the program and assuring that requirements are met, all requirements are listed in the Graduate Studies Catalog and specific program literature and the ultimate responsibility for completion of the program is mine. I certify that to the best of my knowledge, the information furnished in this application is true and complete. I agree that if such information, or any other information upon which my admission is based, is not true or complete, I am subject to dismissal and/or the University may rescind my degree. I acknowledge that all official transcripts and other documents that I forward to the University become the property of the University and will not be forwarded to another institution nor returned to me.

I have enclosed my non-refundable application fee, made payable to California Lutheran University.

Name: _____
Signature of Applicant Date

California Lutheran University is committed to ensuring equal opportunity to all persons and does not discriminate on the basis of gender, race, color, religion, age, sexual orientation, marital status, veterans status, national origin, or ethnic origin. No qualified individual is excluded from admission, employment, participation in any educational program, activity, or facility by reason of disability, providing the individual can properly perform with reasonable accommodation.