



1813 East Main St., Salem, VA 24153 • 540.986.1800

Application for Graduate Admission

Please fill out all sections to apply to American National University.

For our privacy policy, visit an.edu/privacy-policy

Please see the American National University Catalog for term start dates and program availability at an.edu/documents-library/about/Catalog.pdf

Desired program of study:

- | | |
|--|--|
| General MBA | Organizational Management Specialization |
| International Business Management Specialization | Accounting Management Specialization |
| Healthcare Management Specialization | MBA-IT MSIT MSN MSC |

SECTION 1 – GENERAL INFORMATION

Date (day-month-year)	Social Security Number	Date of Birth (day-month-year)
-----------------------	------------------------	--------------------------------

Last Name	First Name	Middle Initial
-----------	------------	----------------

Former Name (if applicable) _____

Address _____

City	State	Zip
------	-------	-----

Area Code/Home Phone	Area Code/Work Phone	Area Code/Cell Phone
----------------------	----------------------	----------------------

Email _____

Name of Emergency Contact	Relationship to Applicant	Area Code/Phone
---------------------------	---------------------------	-----------------

Are you a United States citizen? Yes No

If **No**, please list your country of origin _____

Married (optional): Yes No

Sex: Female Male

- Ethnic Background (optional):
- African American
 - White
 - Hispanic/Latino
 - Other

Are you a Veteran? Yes No

Will you receive Veteran's benefits? Yes No

Are you applying for Military Servicemember's Grants? Yes No

Might you qualify for tuition funding through an agency? Yes No

Name of Agency
 (Employment Commission, Workforce Development, etc.)

SECTION 2 – ACADEMIC BACKGROUND

With the most recent first, list all colleges, universities, and professional and graduate schools attended, and any school in which you are currently enrolled. (Military/Veterans, please include any post-secondary education completed while on active duty.)

I hereby authorize American National University to obtain a copy of my college/university transcript(s) from the appropriate custodian of such records.

College/ University	City/State/Country	Degree Earned	Dates Attended
---------------------	--------------------	---------------	----------------

SECTION 3 – EMPLOYMENT

Current Employer

Will you have Employer Assistance?

Yes No

Position

If yes, please specify:

Address

Would you like American National University to contact your employer regarding ANU's Business Partnership Grant? (for details see an.edu/business-partnership)

City

State

Zip

Yes No

Area Code/Phone

SECTION 4 – SIGNATURE

I hereby apply for admission to the American National University graduate program. I have enclosed the \$75 application fee and understand that this payment will not be refunded. I also grant American National University permission to use my picture and/or testimonial comments for school publications, news releases, and advertisements.

I understand that tuition is charged by the term, based on the number of credit hours I am carrying for the term. I have seen a list of tuition, fees, and charges.

I have received an American National University catalog and have read the refund policy and I understand the policies and procedures concerning my attendance.

The information I have submitted in this application is true and I agree any inaccuracy or false statement will entitle the University to deny admission to me. If accepted, I agree to abide by the policies of the University.

Applicant's Signature

Date

Admissions Representative

Campus Code

\$75 (USD) non-refundable application fee: Please charge my credit card listed below or money order enclosed.

Credit Card Number

Expiration Date

Cardholder's Name

Cardholder's Signature

Submit applications to:

American National University
Graduate Admissions Office
1813 East Main Street
Salem, VA 24153

FOR OFFICE USE ONLY

Term number

Application fee receipt #

Application reviewed by