



**Personal Information**

Semester of Enrollment:  Fall  Spring  Summer Year: \_\_\_\_\_

**Intended Field of Study:**

- MA Masters of Arts in Counseling
  - Emphasis in Clinical Psychology
  - Emphasis in School Counseling
- MEd Masters of Education
  - Educational Leadership
  - Curriculum and Instruction—Reading

US Social Security Number    -   -

LAST NAME FIRST NAME MIDDLE NAME SUFFIX (JR., III)

HOME STREET ADDRESS

CITY STATE/PROVINCE ZIP/POSTAL CODE COUNTRY

EMPLOYER POSITION CELL (REQUIRED)

EMAIL ADDRESS

DATE OF BIRTH (MM/DD/YYYY) GENDER (M/F) RELIGIOUS AFFILIATION

Have you attended Southwestern?  Yes  No If yes, date last attended: \_\_\_\_\_ Any previous last name \_\_\_\_\_

Your response is voluntary and will be used in a nondiscriminatory manner, consistent with applicable civil rights laws. (US Students only)

Ethnicity:  Hispanic  Non-Hispanic

Race:  White  Black  American Indian  Native Hawaiian  Asian  Two or more

Education: (List below all colleges/universities attended, beginning with the school most recently attended)

Institution	City/State/Country	Dates Attended	Majors/Degree	Date Degree Earned

Have you taken the GRE?  Yes  No If no, have you scheduled to take it?  Yes  No

Do you have state certification?  Yes  No

**NOTE:** Admission is granted without a regard to race, sex, handicap, or national origin, but is based on academic qualification. Southwestern expects every student to adhere to and respect the principles and regulations of Southwestern and the standards of the Seventh-day Adventist Church while on campus property. The student is responsible for learning these principles and regulations, which can be found in the student handbook.

I hereby certify that the information I have given in this application is true and correct to the best of my knowledge, knowing that withholding or misrepresenting information may result in cancellation of my registration. By my signature, I pledge to uphold the ideals and standards as stated in the student handbook if admitted as a student.

SIGNATURE OF APPLICANT DATE

Mail your completed application and \$50.00 application fee to:  
Office of Admissions, Southwestern Adventist University, 100 W. Hillcrest St, Keene, Texas 76059

[swau.edu](http://swau.edu)  
[enroll@swau.edu](mailto:enroll@swau.edu)