Graduate Application and Admission Information
2009

Lienhard School of Nursing

Dyson College of Arts and Sciences | Lienhard School of Nursing
Lubin School of Business | School of Education | School of Law
Seidenberg School of Computer Science and Information Systems
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ADMISSION INFORMATION

ELIGIBILITY

Applicants to Pace University graduate degree and certificate programs must hold a bachelor’s degree from an accredited college or university if post-secondary education was completed in the United States. Applicants who are currently in their senior year at an undergraduate institution may apply for admission, but acceptance can be made only contingent upon receipt of a final transcript indicating all senior year grades and receipt of the bachelor’s degree.

Applicants who have attended institutions outside of the United States must hold a degree equivalent to a U.S. bachelor’s degree.

All information provided in the application must be accurate and complete. Any misrepresentation in or omission of facts from the application will justify a denial or revocation of admission or subsequent dismissal from the graduate program. The Office of Graduate Admission reserves the right to verify any or all information in the application and supporting documentation.

PACE UNIVERSITY GRADUATE MERIT SCHOLARSHIPS

Graduate scholarships are awarded to entering full-time and part-time matriculated students who demonstrate exceptional scholastic ability. The Scholarship Committee considers each candidate’s academic record to determine the scholarship award. All students admitted to a degree program are automatically reviewed for scholarship.

There is no separate application to be completed. Domestic scholarship recipients must register for a minimum of six (6) credits per fall and spring semesters. International scholarship recipients must register for nine (9) credits per fall and spring semesters. Other credit requirements will apply to BSN/MS or MA scholarship awards.

ADMISSION CATEGORIES

Matriculant

Applicants who wish to pursue a graduate degree or certificate at Pace University should apply for matriculant status. The University has established the following criteria as the most critical in the evaluation of applications for matriculant status: scholastic achievement and a desire to excel as evidenced by previous academic work; aptitude for graduate study as indicated by scores on an admission test (if required), motivation, leadership potential, and maturity as evidenced by work and/or volunteer experience, extracurricular activities, recommendations, and responses to questions on the application.

Non-Degree Status (NDS)

The objective of the non-degree status is to enable students who qualify by virtue of previous education or experience to enroll in appropriate graduate courses on a space-available basis.

Students who want to register for course work under this status must return the “Application for Non-Degree Status,” with a $65 application fee, to the Office of Graduate Admission after obtaining written approval from the chairperson of the department offering the course(s). At most, two courses taken in non-degree status may be applied to a graduate program if the student is later accepted by the Graduate Admission Committee.

The Application for Non-Degree Status can be found on page 17.

Auditor

Individuals holding a U.S. bachelor’s degree or its equivalent may apply to audit a maximum of two graduate courses at Pace University. The objective of auditor status is to enable students seeking a renewal or extension of knowledge related to their careers to enroll in appropriate graduate courses. Auditors are granted neither grades nor credit for audited courses. An audited course will not be applied to a degree program. Applications for auditor status are available from the Office of Student Assistance.

Alumni Auditor

Alumni of Pace University’s Lienhard graduate programs are eligible to audit graduate classes subject to the approval of the instructor and space limitations. Students must have the necessary background for admission to courses; no course is open to alumni auditors. Interested alumni should file an Alumni Auditor Application with the Office of Student Assistance during the second week of the desired semester.

Visiting Student

A student currently in good standing in a comparable graduate program at another institution may apply to take courses in a graduate program of Pace University by completing the Visiting Student Application on page 15. Applicants accepted as Visiting Students may take a maximum of two courses in a Pace graduate program. Registration for courses is on a space-available basis and the courses must be completed in the semester for which the visiting student applied.

SPECIAL INSTRUCTIONS

DEFERRALS

Students who have been admitted to a graduate program at Pace University but who wish to delay their entrance for a period of time may request a deferral by writing to the Office of Graduate Admission prior to the start of the semester for which admission has been granted. The request must specify the semester the student anticipates entering the program. The graduate admission staff considers each request for deferral individually and retains the right to grant or deny admission for a future semester.

DECISION APPEAL

An applicant who is not approved for admission may appeal the decision. The appeal should be made in writing to the Office of Graduate Admission within one month of notification of denial.
INTERNATIONAL STUDENT INFORMATION

APPLICATION FEE

Applicants from outside the United States must remit the $65 application fee by international money order or by a check drawn from a U.S. bank.

DEADLINE DATE AND STATUS

International applicants who require a student visa are advised to apply well before the priority deadline dates, and must apply for full-time matriculated status.

TRANSCRIPTS

If foreign language transcripts are issued, English translations attested by the institution of origin, the student's Ministry of Education, a U.S. consular officer, or a professionally certified translator approved by Pace University must accompany the official transcripts. Please contact the Pace University Office of Graduate Admission for a list of approved translators.

All materials submitted become the confidential property of Pace University and cannot be returned or forwarded to the applicant or a third party.

TEST OF ENGLISH AS A FOREIGN LANGUAGE (TOEFL)

If you earned a bachelor's degree in a country where English is not the official language and English is not your first language, you must submit a Test of English as a Foreign Language (TOEFL) or International English Language Testing System (IELTS) score that is no more than two years old. Normally, a TOEFL score of 570 (paper-based version), 230 (computer-based version), 88/89 (Internet-based version), or an IELTS score of 6.0 is sufficient to demonstrate the requisite proficiency in English for admission directly to Pace University's academic programs. However, the Admission Committee may require additional testing if, for example, as a result of materials submitted as part of your application, there are concerns about your ability to read, write, and speak English sufficiently to meet the demands of your intended curriculum. In that case, or if your TOEFL or IELTS score is below the guidelines stated above, your admission will be conditional upon your successful completion of an intensive English language program at the Pace University English Language Institute (ELI) or a similar program approved by Pace University's ELI.

STUDENT VISAS

To receive the form I-20 from Pace University, which is required to obtain an entry visa, the applicant must demonstrate that he or she has sufficient funds available to pay for tuition and living expenses for one year of study in the United States.

Students must provide evidence of additional financial support of $5,000 per year for a spouse and $5,000 per year for each child that accompanies the student to the United States.

All applicants who will require Pace University's student visa must submit the Pace University Financial Affidavit for International Students included in this application packet.

All monies pledged on the Pace University Financial Affidavit for International Students must be verified. Monies can be verified in any one or more of the following ways:

A. A bank letter on bank letterhead in English, which contains the applicant's or applicant's sponsor name, account number, the amount of money in U.S. dollars, and the signature of a bank official;
B. A letter of support from a sponsoring scholarship program, fellowship program, or grant organization.

ADDITIONAL INFORMATION

Information regarding applying for your nonimmigrant visa or transferring/changing status if already in the U.S. will be included in your official acceptance packet. In order to assist you, it is required that your home address be provided on the application for admission.

Please note that, as specified by U.S. immigration regulations, students who have entered the U.S. on a tourist visa or on a visa waiver must be in proper status prior to enrolling in classes.

Special situations regarding immigration status should be discussed with an adviser in the Office of International Programs and Services.
APPLICATION INSTRUCTIONS

Please complete and mail your application to the appropriate Office of Graduate Admission. Be sure to sign the last page of the application and all additional papers.

Office of Graduate Admission
Pace University
One Pace Plaza
New York, NY 10038-1598 USA
Phone: (212) 346-1531
Fax: (212) 346-1585
E-mail: gradnyc@pace.edu

Office of Graduate Admission
Pace University
One Martine Avenue
White Plains, NY 10606-1932 USA
Phone: (914) 422-4283
Fax: (914) 422-4287
E-mail: gradwp@pace.edu

Please submit the following:

APPLICATION
APPLICATION FEE
RÉSUMÉ
Applications may be printed or typed and must be accompanied by the nonrefundable application fee of $65 in the form of a check or money order in U.S. dollars payable to Pace University. A résumé or type-written outline, describing at least the past five years of your employment history and significant community, professional, or college extracurricular activities should be sent. Please include recognitions of achievements you have received (e.g., licenses, publications, and awards).

PERSONAL STATEMENT
Send a typewritten essay explaining to the members of the Graduate Admission Committee why you would like to pursue the program of graduate study you have chosen. Additional information regarding your academic performance, as well as professional experience, may be included as a supplement.

LETTERS OF RECOMMENDATION
Two recommendations from individuals who can knowledgeably comment on your ability to successfully complete graduate study are required. These references may be either academic or professional and must be forwarded in envelopes sealed by the recommenders. Recommendation forms can be found in this application packet. Recommenders may write their recommendation on personal stationery or company letterhead.

OFFICIAL TRANSCRIPTS
Transcripts are considered official if sent directly from academic institution(s) to Pace University, or if they are submitted by the applicant, unopened, in the institution's original, sealed envelopes. Be sure to request transcripts from all institutions you have attended prior to your anticipated start date at Pace University.

GRADUATE RECORD EXAMINATION (GRE) OR MILLER ANALOGIES TEST (MAT)
A GRE or MAT score report, no older than five years, is required of all applicants to the BSN/MS (or MA) combined degree program. A test score report is also required for those applicants who wish to be considered for a graduate assistantship. The ETS/GRE reporting code for Pace University, NYC is 2635 and for Westchester, 2644. To obtain a GRE application, write to Educational Testing Service, P.O. Box 6000, Princeton, NJ 08541-6000, USA or visit the GRE Web site at www.gre.org. or call (800) GRE-CALL for computer-based testing registration. To obtain an MAT booklet, write to The Psychological Corporation, 555 Academic Court, San Antonio, TX 78204.

TEST OF ENGLISH AS A FOREIGN LANGUAGE (TOEFL)
If you are required to submit a TOEFL score, the ETS reporting codes for Pace University are: New York City, 2635 and Westchester, 2644. For further information, visit the TOEFL Web site at www.toefl.org.

Note: All documents submitted in support of an application for admission become the permanent possession of Pace University and cannot be returned to the applicant or photocopied for the applicant. For your records, please make photocopies of all materials submitted, except for transcripts and recommendation forms, which must be received unopened, in the original, sealed envelopes.

Priority deadline dates for MS, MA, and certificate program applications are as follows:

<table>
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<tr>
<th>Domestic</th>
<th>International</th>
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<tbody>
<tr>
<td>August 1</td>
<td>June 1</td>
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<tr>
<td>December 1</td>
<td>October 1</td>
</tr>
<tr>
<td>May 1</td>
<td>March 1</td>
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</tbody>
</table>

Priority deadline dates for the BSN/MS or MA program are as follows:

New York City Fall term (September) | June 1
Westchester Spring term (January)   | May 1

October 15 | September 15
Pace University Application for Graduate Admission

LIENHARD SCHOOL OF NURSING

Complete and return the application along with the $65 non-refundable application fee. Please print neatly using blue or black ink or type.

Mr.  
Ms.  

Last Name  
Middle Name  
Jr., III, etc.  
First Name  

Date of Birth (MM/DD/YYYY)  
Social Security Number*  

If any records will be under another name(s), please indicate.

Mailing Address  
Apt. #  
City  
State  
Zip/Postal Code  

Home Phone Number  
Business Phone Number  
Fax Number  

E-mail Address  

Ethnicity (Optional)  

African-American, Non-Hispanic  
American Indian or Alaskan native  
Asian or Pacific Islander  
Caucasian, Non-Hispanic  
Hispanic  
Other (please specify):  

Is English your native language?  
Yes  
No  

Native language (if other than English)  

Campus:  
New York City  
Westchester  

Semester:  
Fall  
Spring  
Summer I  
Summer II  

If accepted for graduate study, will you need campus housing?  
Yes  
No  

International applicants who will require a student visa must apply for full-time study.

Have you previously applied to or enrolled in any school or program of Pace University?  
Yes  
No  

If yes, please explain (include school, program, and entry term date):

Please indicate your degree or certificate objective:

(The New York City program begins in September. The Pleasantville program begins in January.)

BSN/MS/MA: for non-nurse college graduate  

Full-time BSN one-year plan (NYC and Westchester)  
(for applicants who have completed prerequisites)  

BSN two-year plan (for applicants who will complete prerequisites within the BSN portion of the program)  
(Westchester only)  

BSN two-year plan (NYC and Westchester)  
(for applicants who have completed prerequisites)  

Please indicate below the prerequisites you will have completed prior to the entry term you have indicated on the application.

Note: Transcripts and catalog descriptions of this course work should be sent to the appropriate Office of Graduate Admission.

Anatomy and Physiology 1  
(Semester/Year)  

Anatomy and Physiology 2  
(Semester/Year)  

Chemistry  
(Semester/Year)  

Microbiology  
(Semester/Year)  

General Psychology  
(Semester/Year)  

Social Science  
(Semester/Year)  

Statistics  
(Semester/Year)  

MS or MA for RNs with a bachelor’s in a non-nursing major  

Are you a licensed RN?  
Yes  
No  

If yes, please indicate state in which you are an RN.  

MS Family Nurse Practitioner  
(NYC and Pleasantville)  

MA Nursing Education  
(online)  

Doctor of Nursing Practice  
(New York City)  

Certificate of Advanced Graduate Study in Nursing  

Family Nurse Practitioner  
(NYC and Westchester)  

Nursing Education  
(online)  

*Please be advised that your Social Security Number is required in order for your Free Application for Federal Student Aid (FAFSA) to be processed. Your SSN will not be used for identification purposes at Pace University.
If applicable, please indicate when the Graduate Record Examination (GRE) was or will be taken:

GRE Date (MM/YYYY)

If applicable, please indicate when the Miller Analogies Test (MAT) was or will be taken:

MAT Date (MM/YYYY)

If applicable, please indicate when the Test of English as a Foreign Language (TOEFL) was or will be taken:

TOEFL Date (MM/DD/YYYY)

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Are you a citizen of the United States?  ○ Yes  ○ No

Are you a permanent resident of the United States?  ○ Yes  ○ No

If you are not a U.S. citizen or permanent resident, please complete the following:

If accepted for admission to Pace University, will you need a Certificate of Eligibility (I-20) for a student visa?  ○ Yes  ○ No

If no, please indicate visa status you hold or will hold:

Visa

Occupation in your home country

City of birth  Country of birth  Country of citizenship

Are you now in the USA?  ○ Yes  ○ No

If yes, please indicate your present visa status below and provide your home country address:

Visa status  College / Organization / Employer

City

State

Home Country Address:

Please explain here if this visa status expires prior to your anticipated Pace University enrollment date:

(If you do not provide this information, we cannot process your I-20.)

Will dependents accompany you in the U.S.?  ○ Yes  ○ No

If yes, please provide information below:

Last Name  First Name  Middle Name

City of birth  Country of birth  Relationship to student

Which of the following was the most significant factor which prompted your application to Pace University?

Please check one (optional survey):

○ Attended a college or professional fair
○ Attended a GRE or GMAT forum
○ Attended a Pace information session
○ Visited a Pace Graduate Admissions Office
○ Other
A personal statement, résumé, and recommendation are required. Please refer to page 4 of this booklet.

I certify that all of the information provided by me or on my behalf in support of my application for admission is complete and accurate. I acknowledge that I am obligated to supplement my application as soon as I know or reasonably should know if the information I have provided or that was provided on my behalf is inaccurate or incomplete. I also certify that the personal statement submitted in support of my application for admission is solely my own original work. I acknowledge that Pace University may, at its sole discretion, verify any information submitted in conjunction with my application. I acknowledge that if I omit relevant information or provide inaccurate information or information that is misleading, submit a personal statement that is not solely my own original work, or if I fail to supplement my application as required, Pace University may, at its sole discretion, deny my application for admission, rescind my admission, impose disciplinary sanctions against me, dismiss me from Pace University, and/or rescind any degrees or certificates awarded to me by Pace University.

I acknowledge that the application fee I have paid or will pay in the future is not refundable.

I acknowledge that I am bound by the policies, practices, and procedures of Pace University, whether published or unpublished, and I agree to comply with them.

Applicant’s Signature Date (MM/DD/YYYY)

Please print name

Non-Discrimination Statement
Pace University prohibits and will not tolerate discrimination or harassment in any of its programs or activities on the basis of sex, race, color, national origin, religion, creed, age, disability, citizenship, marital status, sexual orientation, genetic predisposition or carrier status, veteran status, or any other characteristic protected by law. Pace University’s Affirmative Action Officer has been designated to handle inquiries regarding the University’s non-discrimination and harassment policy and may be contacted at 156 William Street, New York, New York 10038, (212) 346-1310, or at Costello House, 861 Bedford Road, Pleasantville, New York 10570 (914) 773-3856.

Reasonable Accommodations
Pace University prohibits discrimination on the basis of disability and is committed to ensuring equal access to the application process for applicants with disabilities. An applicant who may require a reasonable accommodation in order to complete the application process should contact the Director of Disability Services on either the New York City (212) 346-3526 or Pleasantville campus (914) 773-3710.

Please list in chronological order all colleges or universities attended since your high school graduation. Be sure to include all institutions at which you were, are, or will be enrolled prior to your anticipated Pace University graduate program entry term, not only those institutions from which you received a degree. An official transcript from each institution must be received by the Pace University Office of Graduate Admission to which you are sending this application. All documents not issued in English must be supplemented by professionally certified English translations (please see International Student Information).

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<th>Institution Attended</th>
<th>City</th>
<th>State</th>
<th>Country</th>
<th>Start Date (MM/YY)</th>
<th>End Date (MM/YY)</th>
<th>Date or Expected Date of Degree (MM/YY)</th>
<th>Degree Received:</th>
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<td>None</td>
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</table>

Have you ever been placed on academic or disciplinary probation or been dismissed from any institution? Yes No

-------------------------------------------------------------------------------------
A personal statement, résumé, and recommendation are required. Please refer to page 4 of this booklet.

I certify that all of the information provided by me or on my behalf in support of my application for admission is complete and accurate. I acknowledge that I am obligated to supplement my application as soon as I know or reasonably should know if the information I have provided or that was provided on my behalf is inaccurate or incomplete. I also certify that the personal statement submitted in support of my application for admission is solely my own original work. I acknowledge that Pace University may, at its sole discretion, verify any information submitted in conjunction with my application. I acknowledge that if I omit relevant information or provide inaccurate information or information that is misleading, submit a personal statement that is not solely my own original work, or if I fail to supplement my application as required, Pace University may, at its sole discretion, deny my application for admission, rescind my admission, impose disciplinary sanctions against me, dismiss me from Pace University, and/or rescind any degrees or certificates awarded to me by Pace University.

I acknowledge that the application fee I have paid or will pay in the future is not refundable.

I acknowledge that I am bound by the policies, practices, and procedures of Pace University, whether published or unpublished, and I agree to comply with them.

Applicant’s Signature Date (MM/DD/YYYY)

Please print name

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Reasonable Accommodations
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<tr>
<th>FOR OFFICE USE ONLY</th>
<th>APP REC DATE (MM/DD/YYYY)</th>
<th>FEE REC DATE (MM/DD/YYYY)</th>
</tr>
</thead>
</table>

2009
RECOMMENDATION FORM

To the Applicant—Please complete the section below. Indicate the location to which the recommender should forward this form.

Office of Graduate Admission
Pace University
One Pace Plaza
New York, NY 10038-1598 USA
Phone: (212) 346-1531
Fax: (212) 346-1585
E-mail: gradnyc@pace.edu

Applicant Name __________________________________________________________________________________________________
First
Middle
Last

Applicant Address ________________________________________________________________________________________________

Applicant Day Telephone  (________) ________________________ Evening Telephone   (________) _________________________
Area Code / Number Area Code / Number
Fax (________) _____________________________ E-mail ________________________________
Area Code / Number

Location  □ New York City  □ Westchester

Applicant Entry Term  □ Fall □ Spring □ Summer I □ Summer II
Year Year Year Year

To the Recommender—Please complete both sides of this form and return it to the Office of Graduate Admission indicated above. If you wish to use a letter or different format, please feel free to do so. Thank you for your assistance.

Name of Recommender (Please print) ________________________________________________________________________________

Signature of Recommender _______________________________  _______________________  ______________/________/________
Month Day Year

Position or Title _________________________________  School or Firm ____________________________________________________

Address _________________________________________________________________________________________________________
Number and Street                                                                City                                                                    State                        Zip Code

Telephone (________) _______________________________
Area Code / Number

In what capacity have you known the applicant? ____________________________________________

What is your overall recommendation?

□ Strongly recommend     □ Recommend     □ Recommend with some reservation     □ Do not recommend
The Admission Committee would appreciate your candid appraisal of the applicant.

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<thead>
<tr>
<th></th>
<th>Outstanding (Top 2%)</th>
<th>Superior (Top 10%)</th>
<th>Good (Top Third)</th>
<th>Fair (Middle Third)</th>
<th>Poor (Bottom Third)</th>
<th>No basis for judgement</th>
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<tbody>
<tr>
<td>Intellectual Ability</td>
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<td>Ability to Work with Others</td>
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<td>Ability in Written Expression</td>
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<td>Ability in Oral Expression</td>
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<tr>
<td>Maturity</td>
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<td>Initiative/Independence</td>
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<td>Creativity/Originality</td>
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<td>Potential for Career Advancement</td>
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</table>

What are the applicant's primary strengths and weaknesses? If possible, please describe specific instances or accomplishments which demonstrate them. Describe the applicant's current assignment and special responsibilities, if applicable.

Please assess the applicant in the following areas:
  a. Area of specialization (technical knowledge, analytical ability, attention to detail, etc.)
  b. Potential for achievement in graduate study
  c. Potential for professional achievement
LIENHARD SCHOOL OF NURSING

RECOMMENDATION FORM

To the Applicant—Please complete the section below. Indicate the location to which the recommender should forward this form.

Office of Graduate Admission
Pace University
One Pace Plaza
New York, NY 10038-1598 USA
Phone: (212) 346-1531
Fax: (212) 346-1585
E-mail: gradnyc@pace.edu

Office of Graduate Admission
Pace University
One Martine Avenue
White Plains, NY 10606-1932 USA
Phone: (914) 422-4283
Fax: (914) 422-4287
E-mail: gradwp@pace.edu

Applicant Name __________________________________________________________________________________________________
First Middle Last
Applicant Address ________________________________________________________________________________________________
_________________________________________________________________________________________________
Applicant Day Telephone (________) ________________________ Evening Telephone (________) _________________________
Area Code / Number Area Code / Number
Fax (________) ____________________________        E-mail ________________________________
Area Code / Number

Location  □ New York City  □ Westchester
Applicant Entry Term  □ Fall _____  □ Spring _____  □ Summer I _____  □ Summer II _____
Year Year Year Year

To the Recommender—Please complete both sides of this form and return it to the Office of Graduate Admission indicated above.
If you wish to use a letter or different format, please feel free to do so. Thank you for your assistance.

Name of Recommender (Please print) ________________________________________________________________________________
Signature of Recommender _______________________________ _ _ _ _______________________ ________/________/________
Month Day Year
Position or Title _________________________________ School or Firm ____________________________________________________
Address _________________________________________________________________________________________________________
Number and Street                                                                City                                                                    State                        Zip Code
Telephone (________) ____________________________
Area Code / Number

In what capacity have you known the applicant? ____________________________________________

What is your overall recommendation?
□ Strongly recommend  □ Recommend  □ Recommend with some reservation  □ Do not recommend
The Admission Committee would appreciate your candid appraisal of the applicant.

<table>
<thead>
<tr>
<th>Area</th>
<th>Outstanding (Top 2%)</th>
<th>Superior (Top 10%)</th>
<th>Good (Top Third)</th>
<th>Fair (Middle Third)</th>
<th>Poor (Bottom Third)</th>
<th>No basis for judgement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intellectual Ability</td>
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<tr>
<td>Ability to Work with Others</td>
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<tr>
<td>Ability in Written Expression</td>
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<tr>
<td>Ability in Oral Expression</td>
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<tr>
<td>Maturity</td>
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<tr>
<td>Initiative/Independence</td>
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<tr>
<td>Creativity/Originality</td>
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<tr>
<td>Potential for Career Advancement</td>
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</tbody>
</table>

What are the applicant's primary strengths and weaknesses? If possible, please describe specific instances or accomplishments which demonstrate them. Describe the applicant's current assignment and special responsibilities, if applicable.

Please assess the applicant in the following areas:

a. Area of specialization (technical knowledge, analytical ability, attention to detail, etc.)

b. Potential for achievement in graduate study

c. Potential for professional achievement
**GRADUATE ASSISTANTSHIP APPLICATION**

Please attach a copy of your résumé and forward this assistantship application to:

Lienhard School of Nursing  
Pace University  
861 Bedford Road, Room LH 314  
Pleasantville, NY 10570 USA  

Please do not submit this form to the Office of Graduate Admission.

To the Applicant—Please complete both sides of this form.

Name  
Ms.  
Mr. _______________________________________________ ___________________________________________________  

Last                                       First

Present Address______________________________________________________________________________________________________  
Street                                          City                                                                                   State                        Zip Code

Permanent Address ___________________________________________________________________________________________________  
Street                                          City                                                                                   State                        Zip Code

Day Telephone (_______) _____________________________ Evening Telephone (_________) ___________________________________  
Area Code / Number                                                                                                           Area Code / Number

Fax (_______) _____________________________        E-mail ______________________________________  
Area Code / Number

Please indicate your anticipated entry term:  
I  
Fall _______  I  
Spring _______  I  
Summer I _______  I  
Summer II _______Year Year Year Year

Please indicate your intended location:  
I  
New York City  I  Westchester

Please indicate whether you are interested in a full-time or part-time assistantship:  
I  
Full-time  I  Part-time

Please indicate the Pace University graduate degree program to which you are applying: __________________________________________

Undergraduate Institution _______________________________________________________________________________________________  
Undergraduate Major ________________________________________________    Undergraduate Grade Point Average________________ _ ___

Previous graduate institution, major, graduate grade point average (if applicable) _______________________________________________

GRE Score  
Verbal__________________  Quantitative_______________  Analytical Writing_______________  
Date _______/_____/_______  
Month Day Year

MAT score (if applicable)  
Total _____________  Date _______/_____/_______  
Month Day Year

TOEFL score  (if applicable)______________________________________________________________

Please complete the Skills Questionnaire and indicate any specific skills which you have that would enable you to perform well as a graduate assistant:

________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________

I understand and agree that my admission, if granted, my registration and continuance on the rolls and graduation are subject to all policies, rules, regulations, and procedures set forth in the current bulletins, catalogs, and other publications and notices of Pace University and as they may be amended, including but not limited with respect to scholarship, discipline, attendance, and payment or abatement of fees.

Signature _______________________________________________ Date _______/_____/_____  
Month Day Year

2009
GRADUATE ASSISTANT SKILLS QUESTIONNAIRE

Please rate your level of experience with each of the areas listed below. You do not have to be an expert in all areas to qualify for a position. We are looking for assistants with a variety of skills.

<table>
<thead>
<tr>
<th>Area</th>
<th>Very Confident</th>
<th>Some Experience</th>
<th>No Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Library Research</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Use of Personal Computer</td>
<td></td>
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<tr>
<td>Typing</td>
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<tr>
<td>Interviewing</td>
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<tr>
<td>Writing</td>
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<tr>
<td>Statistics</td>
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<tr>
<td>Basic research process</td>
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<td></td>
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<tr>
<td>Use of Software Programs</td>
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<tr>
<td>Word processing</td>
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<tr>
<td>(e.g., Word, WordPerfect)</td>
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<tr>
<td>Spreadsheet</td>
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<tr>
<td>(e.g., Excel, Lotus 123)</td>
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<tr>
<td>Database management</td>
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<tr>
<td>(e.g., Access, dBASE)</td>
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<tr>
<td>Manuscript management</td>
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<tr>
<td>(e.g., End Note, Ref Mgr.)</td>
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<tr>
<td>Statistical packages</td>
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<tr>
<td>(e.g., SPSS, Instat)</td>
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<tr>
<td>Internet browsers</td>
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<tr>
<td>(e.g., Netscape, Internet Explorer)</td>
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<tr>
<td>Online Services</td>
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<tr>
<td>(e.g., AOL, Prodigy, CompuServe)</td>
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<tr>
<td>Searching Databases</td>
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<tr>
<td>Editing Manuscripts</td>
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<tr>
<td>Teaching</td>
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<tr>
<td>Other (please specify)</td>
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</table>

Pace University does not discriminate in admission, administration of programs, or employment against any individual on the basis of that individual’s sex, age, race, religion, sexual orientation, disability, or national origin, marital or domestic partnership status or veteran status. Inquiries regarding compliance with related federal regulations may be directed to: Affirmative Action Officer, Pace University, One Pace Plaza, New York, NY 10038, or to the Director of the Office for Civil Rights, U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Washington, DC, 20201.
VISITING STUDENT APPLICATION

Please submit this application with a $65 nonrefundable application fee to the appropriate Office of Graduate Admission, accompanied by a sealed envelope containing an original statement from the graduate school in which you are currently enrolled which includes the following:

1. The graduate degree program in which you are matriculated;
2. Verification that you are a graduate student in good standing; and
3. An official university seal or signature.

Name _____________________________________________________________
________________________________________________
First                                 Middle                                        Last

Present Address ____________________________________________________________________________________________________
Street                                            City                                                                    State                                    Zip

Home Telephone (________) _________________________________    Business Telephone (________) ________________________________
Area Code / Number                                                                                                                  Area Code / Number

Fax (________) _________________________________
E-mail  ________________________________
Area Code / Number

Institution Currently Attending _____________________________________________ Name ____________________________
Location

Semester in which you wish to enroll:  ☐ Fall _____ ☐ Spring _____ ☐ Summer I _____ ☐ Summer II _____
Year Year Year Year

Campus:  ☐ New York City     ☐ Westchester

Graduate program you wish to attend:

DYSON COLLEGE OF ARTS AND SCIENCES
☐ Counseling
☐ Environmental Science
☐ Forensic Science
☐ Psychology
☐ Publishing
☐ Public Administration

LUBIN SCHOOL OF BUSINESS
☐ SEIDENBERG SCHOOL OF COMPUTER SCIENCE AND INFORMATION SYSTEMS
☐ SCHOOL OF EDUCATION
☐ LIENHARD SCHOOL OF NURSING

You may register for a maximum of TWO COURSES on a space-available basis. Courses must be completed in the semester indicated above.

_________________________________________________________ _______________________________________________
Course Number Title
_________________________________________________________ _______________________________________________
Course Number Title

Have you ever applied to or enrolled in any graduate program at Pace University?  ☐ Yes    ☐ No

If yes, please indicate:  Semester ___________ Year ___________ Program ________________________________

I certify that all of the information provided by me or on my behalf in support of my application for admission is complete and accurate. I acknowledge that I am obligated to supplement my application as soon as I know or reasonably should know if the information I have provided or that was provided on my behalf is inaccurate or incomplete. I also certify that the personal statement submitted in support of my application for admission is solely my own original work. I acknowledge that Pace University may, at its sole discretion, verify any information submitted in conjunction with my application. I acknowledge that if I omit relevant information or provide inaccurate information or information that is misleading, submit a personal statement that is not solely my own original work, or fail to supplement my application as required, Pace University may, at its sole discretion, deny my application for admission, rescind my admission, impose disciplinary sanctions against me, dismiss me from Pace University, and/or rescind any degrees or certificates awarded to me by Pace University.

I acknowledge that the application fee I have paid or will pay in the future is not refundable.

I acknowledge that I am bound by the policies, practices, and procedures of Pace University, whether published or unpublished, and I agree to comply with them.

Date __________/________/________/    __________________________
Month        Day        Year        Signature of Applicant

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APPLICATION FOR GRADUATE NON-DEGREE STATUS

To apply and register as a Non-Degree student, you must:

Contact the academic department listed below in order to schedule an advisement session and to obtain approval.

(You will need to provide a copy of your undergraduate and/or graduate transcripts.)

Dyson College of Arts and Sciences
Counseling (914) 773-3309
Environmental Science (914) 773-3655
Forensic Science (212) 346-1502

Seidenberg School of Computer Science and Information Systems (212) 346-1005
School of Education (212) 346-1338
Lienhard School of Nursing (212) 346-1439

School of Health Professions and Technology
Forensic Science (212) 346-1502

Office of Graduate Admission
Pace University
One Pace Plaza
New York, NY 10038-1598 USA
Phone: (212) 346-1531
Fax: (212) 346-1585
E-mail: gradnyc@pace.edu

Office of Graduate Admission
Pace University
One Martine Avenue
White Plains, NY 10606-1932 USA
Phone: (914) 422-4283
Fax: (914) 422-4287
E-mail: gradwp@pace.edu

Submit the department-approved application and registration form with a non-refundable $65 check or money order to the appropriate Office of Graduate Admission.

1. Name
   Last                                                                                   First                                                                     Middle
   __________________________

2. □ Female       □ Male

3. Current Mailing Address
   __________________________________________________________________________________________

4. Day Telephone (________) _____________________________  5. Evening Telephone (________) _____________________________

6. Fax (________) ____________________________________________
   Area Code / Number

7. E-mail ____________________________________________________________________________
   Area Code / Number

8. Please indicate the entry term for which you are applying:
   □ Fall            □ Spring         □ Summer I        □ Summer II

9. At which campus location do you plan to attend classes?
   □ New York City   □ Westchester

10. Have you previously applied to any graduate program of Pace University?  □ Yes  □ No  If yes, please explain:

11. Please list in chronological order all institutions attended since your high school graduation.

<table>
<thead>
<tr>
<th>Undergraduate/Graduate Institution Attended</th>
<th>Location</th>
<th>Dates Attended</th>
<th>Major</th>
<th>Degree Awarded</th>
<th>Date or Expected Date of Degree</th>
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</tbody>
</table>

If I enroll in the Seidenberg School of Computer Science and Information Systems as a non-degree student, I confirm that I have the appropriate undergraduate course work or its equivalent for the courses in which I register. If I enroll in the Dyson College of Arts and Sciences, School of Education, or Lienhard School of Nursing, I confirm that I hold a U.S. Bachelor’s degree or its equivalent. My signature below further confirms that I do not require a student visa or exchange visitor’s visa to attend graduate classes at Pace University. I understand that I may enroll for a maximum of 12 credits as a non-degree student and that I am not guaranteed acceptance to a graduate program of Pace University. I further understand that if I am accepted to a degree program, generally, credit for only two courses successfully completed as a non-degree student may be applied to a program.

I certify that all of the information provided by me or on my behalf in support of my application for admission is complete and accurate. I acknowledge that I am obligated to supplement my application as soon as I know or reasonably should know if the information I have provided or that was provided on my behalf is inaccurate or incomplete. I also certify that the personal statement submitted in support of my application for admission is solely my own original work. I acknowledge that Pace University may, at its sole discretion, verify any information submitted in conjunction with my application. I acknowledge that if I omit relevant information or provide inaccurate information or information that is misleading, submit a personal statement that is not solely my own original work, or if I fail to supplement my application as required, Pace University may, at its sole discretion, deny my application for admission, rescind my admission, impose disciplinary sanctions against me, dismiss me from Pace University, and/or rescind any degrees or certificates awarded to me by Pace University.

I acknowledge that the application fee I have paid or will pay in the future is not refundable.

I acknowledge that I am bound by the policies, rules, and regulations of Pace University, whether published or unpublished, and I agree to comply with them.

Signature ____________________________________________    Date ___________/__________/__________/

FOR OFFICE USE ONLY    FEE REC DATE ______/_____/______    BY _____________________________
                        DATA ENTRY DATE ______/_____/______    BY _____________________________
# REGISTRATION FORM FOR GRADUATE NON-DEGREE STATUS

**Student I.D. Number**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
</tr>
</thead>
</table>

**Fall Year**

**Spring Year**

**Summer I Year**

**Summer II Year**

## (Course Selection)

<table>
<thead>
<tr>
<th>CAMPUS</th>
<th>SUBJECT</th>
<th>COURSE</th>
<th>DAY</th>
<th>R=THUR</th>
<th>O=SUN</th>
<th>COURSE REFERENCE NO.</th>
<th>CRS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NY/MT/WT/GC/PL/BR/OC</td>
<td>X</td>
<td>Y</td>
<td>Y</td>
<td>Z</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

## (Department Approval)

<table>
<thead>
<tr>
<th>CHAIR SIGNATURE</th>
<th>DATE</th>
<th>GAS/GCS GDN/GED</th>
</tr>
</thead>
</table>

Please provide information below. (Optional)

**DATE OF BIRTH**

**ETHNICITY (OPTIONAL):**

- 1. African-American, non-Hispanic
- 2. Asian or Pacific Islander
- 3. Hispanic
- 4. American Indian or Alaskan native
- 5. Caucasian, non-Hispanic
- 6. Other _______________________________(please specify)

**EMERGENCY NAME:**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>RELATIONSHIP</th>
</tr>
</thead>
</table>

**EMERGENCY ADDRESS:**

______________________________________________________________________________________________

______________________________________________________________________________________________

**EMERGENCY TELEPHONE:**

(_______) __________________________

I understand and agree that my admission, if granted, my registration and continuance on the rolls and graduation are subject to all policies, rules, regulations, and procedures set forth in the current bulletins, catalogs, and other publications, and notices of Pace University and as they may be amended, including but not limited with respect to scholarship, discipline, attendance, immunization requirements, and payment or abatement of fees.

Signature ______________________________________________ DATE __________/________/________

Month Day Year

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**FOR OFFICE USE ONLY**

<table>
<thead>
<tr>
<th>REG. OPERATOR’S SIGNATURE</th>
<th>DATE (MM/DD/YYYY)</th>
</tr>
</thead>
</table>

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18

2009
LIENHARD SCHOOL OF NURSING

FINANCIAL AFFIDAVIT FOR INTERNATIONAL STUDENTS

An international applicant accepted for admission to a graduate program at Pace University who requires a Certificate of Eligibility for a student visa must submit the International Applicant Financial Affidavit below. The completed affidavit must be submitted with a letter from a bank indicating the availability of sufficient funds in U.S. dollars available for one year of study. Applicants are advised to obtain two sets of bank documentation in order to have one set for the embassy use.

If any financial support is to be provided by one or more sponsors, the Sponsor(s) Affidavit(s) of Support must also be submitted and the sponsor(s) must provide the required bank documentation.

(Note: The Sponsor Affidavit of Support which follows this page may be reproduced.)

I certify that I have _________ U.S. dollars available to me for the following expenses of my graduate education at Pace University.

I have indicated the source of my financial support below and have attached original bank documentation in U.S. dollars. The information I have provided on this affidavit is correct and complete. I know that giving false information on this affidavit or in support documentation may result in the cancellation of my admission to Pace University. I also understand that the entire tuition and general institution fee is due at the time of registration for each term, that the insurance cost is an annual fee, and that costs may rise in succeeding terms. I also understand that if I am required to enroll for English language coursework, additional costs will ensue.

LIENHARD SCHOOL OF NURSING

2009–2010 ESTIMATED EXPENSES FOR THE FALL AND SPRING TERMS*
(not applicable to BSN/MS Combined Degree Program)

<table>
<thead>
<tr>
<th>Source of Support</th>
<th>U.S. Dollars</th>
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</thead>
<tbody>
<tr>
<td>(self or sponsor**)</td>
<td>$15,037.00</td>
</tr>
<tr>
<td>Living Expenses (Room and Board)</td>
<td>$11,739.00</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>$552.00</td>
</tr>
<tr>
<td>Other (books, personal expenses, and transportation)</td>
<td>$2,648.00</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>$29,976.00</strong></td>
</tr>
</tbody>
</table>

Estimated Expenses for the Optional Summer I and Summer II Terms*

<table>
<thead>
<tr>
<th>Source of Support</th>
<th>U.S. Dollars</th>
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</thead>
<tbody>
<tr>
<td>(self or sponsor**)</td>
<td>$4,761.00</td>
</tr>
<tr>
<td>Living Expenses (Room and Board)</td>
<td>$5,399.00</td>
</tr>
<tr>
<td>Other (books, personal expenses, and transportation)</td>
<td>$620.00</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>$10,780.00</strong></td>
</tr>
</tbody>
</table>

Grand Total (12 Months): **$40,756.00**

_________________________    _______/________/_______    __________________________________________
Signature                                                                                       Month Day Year          Print Name

______________________________________________________________________________________________
Print Address

__________________________________      __________________________________     _______________________________________
Print Telephone Number Fax E-mail

*  Subject to change
**Each sponsor must complete an affidavit of support (see reverse side) and submit official bank documentation verifying availability of funds.
LIENHARD SCHOOL OF NURSING

SPONSOR AFFIDAVIT OF SUPPORT

TO BE COMPLETED BY SPONSOR 1

I certify that I am willing and able to sponsor ____________________________ (insert student name) with the minimum amount of ____________________ U.S. dollars for her/his graduate tuition and living expenses while attending Pace University. I have attached original bank documentation in U.S. dollars dated and signed by a bank official no more than six months before the student's enrollment at Pace University indicating savings account funds sufficient to sponsor the student.

Signature ____________________________ Month / Day / Year Relationship to Student

Print name ____________________________ Sponsor Citizenship

Print address ____________________________ Telephone number

Fax (________) _________________________ E-mail _________________________

SPONSOR AFFIDAVIT OF SUPPORT

TO BE COMPLETED BY SPONSOR 2

I certify that I am willing and able to sponsor ____________________________ (insert student name) with the minimum amount of ____________________ U.S. dollars for her/his graduate tuition and living expenses while attending Pace University. I have attached original bank documentation in U.S. dollars dated and signed by a bank official no more than six months before the student's enrollment at Pace University indicating savings account funds sufficient to sponsor the student.

Signature ____________________________ Month / Day / Year Relationship to Student

Print name ____________________________ Sponsor Citizenship

Print address ____________________________ Telephone number

Fax (________) _________________________ E-mail _________________________

SPONSOR AFFIDAVIT OF SUPPORT

TO BE COMPLETED BY SPONSOR 3

I certify that I am willing and able to sponsor ____________________________ (insert student name) with the minimum amount of ____________________ U.S. dollars for her/his graduate tuition and living expenses while attending Pace University. I have attached original bank documentation in U.S. dollars dated and signed by a bank official no more than six months before the student's enrollment at Pace University indicating savings account funds sufficient to sponsor the student.

Signature ____________________________ Month / Day / Year Relationship to Student

Print name ____________________________ Sponsor Citizenship

Print address ____________________________ Telephone number

Fax (________) _________________________ E-mail _________________________