

# Application for Graduate Admission International Applicant

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

For our privacy policy, visit [an.edu/privacy-policy](http://an.edu/privacy-policy)

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

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|--|--|
| General MBA                                      | Organizational Management Specialization |
| International Business Management Specialization | Accounting Management Specialization     |
| Healthcare Management Specialization             | ESL                                      |
| IT Specialization                                |  |

Desired program of study: \_\_\_\_\_

## SECTION 1 – GENERAL INFORMATION

\_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_ Passport Number \_\_\_\_\_ Date of Birth (dd/mm/yyyy)

\_\_\_\_\_ Surname/Family name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
 (Name as it appears on your passport)

\_\_\_\_\_ Home Street Address \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Postal code/Zip \_\_\_\_\_ Country \_\_\_\_\_

\_\_\_\_\_ UPS Shipping Address \_\_\_\_\_

\_\_\_\_\_ Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Phone Numbers: (Country Code, City Code, Number)

\_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_ Name of Emergency Contact \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Postal/Zip \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

\_\_\_\_\_ Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Emergency Contact Phone Numbers: (Country Code, City Code, Number)

Please list your country of citizenship \_\_\_\_\_

Sex:  Female  Male

Ethnic Background (optional):  African American  White

Married (optional):  Yes  No

Asian  Hispanic/Latino  Other

## 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.

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/Country	Degree Earned	Dates Attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Transcript Permission (signature) \_\_\_\_\_

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## SECTION 3 – EMPLOYMENT

Current Employer \_\_\_\_\_

Position \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Postal code/Zip \_\_\_\_\_

Area Code/Phone \_\_\_\_\_

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## SECTION 4 – TEST DATA FOR NON-U.S. DEGREE HOLDERS ONLY

Please include date and score for one of the following tests: GMAT, TOEFL, IELTS, GRE, LSAT. CPA or other scores for international applicants. Also include documentation of your tests and scores in your document submission.

	Date	V	Q	A		Date	Score		Date	Score
<b>GMAT</b>	_____†/	_____†/	_____†/	_____	<b>TOEFL</b>	_____	_____	<b>IELTS</b>	_____	_____
	Date	V	Q		Date	Score	Date	Completed	Submit Documentation	
<b>GRE</b>	_____†/	_____†/	_____†/	<b>LSAT</b>	_____	_____	<b>CPA</b>	_____	<b>Other</b>	_____

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## SECTION 5 – SIGNATURE

I hereby apply for admission to the American National University graduate program. I have enclosed the \$125 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 \_\_\_\_\_

**\$125** (USD- \$75 non-refundable application fee + \$50 I-20 processing 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:**  
International Admissions Office  
American National University  
1813 East Main Street  
Salem, VA 24153  
United States

**FOR OFFICE USE ONLY**

\_\_\_\_\_ Term number

Application fee receipt # \_\_\_\_\_

Application reviewed by \_\_\_\_\_