

THE DEPARTMENT OF POLITICAL SCIENCE
BACHELOR OF ARTS/MASTER OF PUBLIC ADMINISTRATION ACCELERATED DEGREE PROGRAM
APPLICATION FOR ADMISSION

APPLICATION DEADLINES | Fall: April 15 | Spring: October 15

SUBMIT APPLICATION, TWO LETTERS OF RECOMMENDATION, STATEMENT OF PURPOSE, AND UNOFFICIAL OU TRANSCRIPT TO:
 BA/MPA APPLICATIONS, DEPARTMENT OF POLITICAL SCIENCE, 455 W. LINDSEY ST., ROOM 205, NORMAN, OK 73019-2001

LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX (JR., SR., II)

STUDENT INFORMATION

SOONER ID#
CURRENT GPA
NATIONAL MERIT SCHOLAR <input type="checkbox"/> YES
TERM YOU PLAN TO ENTER THE BA/MPA ACCELERATED DEGREE PROGRAM <input type="checkbox"/> FALL OF _____ <input type="checkbox"/> SPRING OF _____
CLASSIFICATION <input type="checkbox"/> SENIOR <input type="checkbox"/> JUNIOR <input type="checkbox"/> SOPHOMORE <input type="checkbox"/> FRESHMAN
CURRENT MAJOR

PERMANENT HOME ADDRESS

STREET	CITY	STATE	ZIP CODE
COUNTY (IF OKLAHOMA)		COUNTRY	

MAILING ADDRESS FOR REPLY (IF DIFFERENT FROM PERMANENT ADDRESS)

STREET	CITY	STATE	ZIP CODE	COUNTRY

PHONE NUMBERS & EMAIL

HOME PHONE	CELL PHONE	OU EMAIL ADDRESS

CITIZEN INFORMATION

<input type="checkbox"/> U.S. CITIZEN	<input type="checkbox"/> U.S. PERMANENT RESIDENT	<input type="checkbox"/> NON U.S. CITIZEN
COUNTRY OF BIRTH		COUNTRY OF CITIZENSHIP (IF NOT U.S.)

RESIDENCE STATUS

<input type="checkbox"/> RESIDENT OF OKLAHOMA	<input type="checkbox"/> NON RESIDENT
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RECOMMENDATION LETTERS

PLEASE LIST THE TWO AUTHORS OF YOUR RECOMMENDATION LETTERS.
1.
2.

Applicant Signature	Date
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