



NATIONAL DEFENSE UNIVERSITY

University Registrar's Office

MASTER'S DEGREE APPLICATION FORM FOR INTERNATIONAL STUDENTS

Privacy Act Statement

Authority: 10 U.S.C. §2163 (Degree Granting Authority for National Defense University); 10 U.S.C. §2165 (National Defense University).

Purpose: Information is collected as application for admission to an NDU master's degree program.

Routine Use: Information will be disclosed within NDU for admissions purposes, and submission of this application constitutes your permission to do so. The applicable system of records notice is located at: <https://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570570/dndu01/>.

Disclosure: Voluntary; however, failure to provide the information may result in denial of admission to an NDU master's program.

AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, XXXX-XXXX, is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

LEGAL NAME:

_____ *Last/Family/Surname* _____ *First* _____ *Middle*

HOME COUNTRY: _____ TITLE/RANK & BRANCH OF SERVICE: _____

APPLICATION FOR:

- M.A. in Strategic Security Studies (CISA students)
- M.S. in Government Information Leadership (CIC students)
- M.S. in Joint Campaign Planning and Strategy (JAWS students)
- M.S. in National Resource Strategy (ES students)
- M.S. in National Security Strategy (NWC students)

EDUCATIONAL BACKGROUND

__ Undergraduate Degree __ Graduate Degree __ Short Term Study

Institution: _____ Title of Degree/Credential Earned: _____

Attendance- Start Date: _____ End Date/Date of Graduation: _____

Major/Course of Study/Specialization: _____

Applicable notes for this course of study: _____

__ Undergraduate Degree __ Graduate Degree __ Short Term Study

Institution: _____ Title of Degree/Credential Earned: _____

Attendance- Start Date: _____ End Date/Date of Graduation: _____

Major/Course of Study/Specialization: _____

Applicable notes for this course of study: _____

Undergraduate Degree Graduate Degree Short Term Study

Institution: _____ Title of Degree/Credential Earned: _____

Attendance- Start Date: _____ End Date/Date of Graduation: _____

Major/Course of Study/Specialization: _____

Applicable notes for this course of study: _____

Undergraduate Degree Graduate Degree Short Term Study

Institution: _____ Title of Degree/Credential Earned: _____

Attendance- Start Date: _____ End Date/Date of Graduation: _____

Major/Course of Study/Specialization: _____

Applicable notes for this course of study: _____

OTHER DIPLOMAS, SCHOOLS ATTENDED OR CERTIFICATIONS (FILL IN AS NECESSARY FOLLOWING FORMAT AS ABOVE.)

ENGLISH PROFICIENCY:

I already took the TOEFL examination on (date) _____ Score _____

I will register for and take the TOEFL before the 1 October deadline.

I believe I am exempted from the TOEFL exam per the annual DSCA memorandum.

URO CONFIRMATION

INSTRUCTIONS:

You are responsible for providing copies of all academic credentials listed above in their native language and with English translations as necessary. You must also provide a resume detailing the chronology of your experience and education.

Student's Signature _____ Date _____