

### Introduction

Thank you for your interest in the graduate business programs at Coastal Carolina University.

The Master of Business Administration is a 30-hour graduate degree program that provides study of major areas of business encompassing the disciplines of accounting, finance, economics, management and marketing. The program balances an applied service sector focus with a strong grounding in finance and accounting. Students are actively involved in coursework through extensive use of cases, simulations, research in discipline-specific databases, projects and appropriate learning technologies.

The Master of Accountancy (MAcc) Program is also designed to provide students with a broad-based business education. The curriculum focuses on enhancing a student's analytical and critical thinking skills, written and oral communication skills, and understanding of the global nature of the accounting profession. The program will allow students to enter the accounting profession and achieve certification as Certified Public Accountants (CPA) and/or Certified Management Accountants (CMA). The program is also 30 hours.

The Fraud Examination Certificate Program provides students the opportunity to explore the areas of fraud detection, analysis and prevention. The 12-hour program is perfect for working professionals, such as law enforcement officers, lawyers and accounting professionals who are interested in developing an expertise in fraud examination.

The Business Foundations Certificate Program provides students a solid foundation in business concepts and practice. The courses cover the essentials of accounting, finance, marketing, management, entrepreneurship and information technology. This 16-hour program is intended for non-business majors who plan to enter the workforce or a graduate degree program upon completion of their undergraduate degree. It is also designed for post-graduates who wish to acquire certification in basic business knowledge.

### Submission of Required Credentials

All graduate applications must first be processed through the Office of Graduate Studies. Please submit your application and all information requested to the Office of Graduate Studies, Coastal Carolina University, P.O. Box 261954, Conway, SC 29528-6054 USA.

Once your application is complete, it will be forwarded to the Graduate Admissions Office of the Wall College of Business.

Your application cannot be considered until your non-refundable \$45 application fee and all the following required credentials are received:

► **Transcripts** You must submit an official transcript from every institution you have attended. Receipt of a baccalaureate and/or higher degree from a regionally accredited institution must be clearly indicated on the transcript from the awarding institution. Official transcripts are those sent by the registrar of a college or university directly to the Office of Graduate Studies. The Office of Graduate Studies does not request transcripts from any institution.

► **Letters of Recommendation** At least two letters of recommendation (scholastic or professional) are required with your graduate application. Forms for letters of recommendation are provided in this application packet. References should mail completed forms directly to the Office of Graduate Studies, Coastal Carolina University, P.O. Box 261954, Conway, SC 29528-6054 USA

► **A Resumé** To include academic education and work history, with dates.

► **Official Test Scores** Your Graduate Management Admissions Test (GMAT) scores must be submitted before your application can be processed. Test scores must include your score on the Analytical Writing Assessment. Applicants may have their GMAT requirement waived if they submit evidence of having an advanced credential such as a master's degree or Certified Public Accountant (CPA) certificate, for example. Students applying to the Accountancy degree program may also have their exam waived based on their GPA. Contact the Wall College of Business to learn more about waivers or minimum scores required. Please note that GRE scores are also accepted.

### ► Official Scores for International Students

Citizens of countries other than the United States of America who apply to Coastal's graduate programs must meet the University's graduate admission requirements in addition to any requirements specific to the chosen degree program. All international applicants must:

1. Submit a completed degree seeking application for graduate admission to the chosen program;
2. Provide original or certified copies of all certificates, transcripts, and degrees (if these documents are not in English, then official translations must be included as well);
3. Submit the required standardized test results;
4. If a non-native speaker of English, provide official results from tests taken within the last 3 (three) years of one of the following acceptable means of documenting English language proficiency consistent with success in graduate programs (Note that higher scores may be required of some graduate programs so applicants are urged to consult their desired program to identify whether a higher score is required):
  - a. A minimum score of 550 on the paper-based (PBT) or 79 on the internet (iBT) Test of English as a Foreign Language (TOEFL);
  - b. A minimum score of 6.5 on the International English Language Testing System (IELTS) exam;
  - c. Certificate of Completion of level 112 of English for Academic Purposes (EAP) from ELS Language Centers;
  - d. Pearson Test of English (PTE) Academic with a score of 59;
  - e. Cambridge CAE (Certificate of Advanced English) with a minimum level of C1;
  - f. Cambridge CPE (Certificate of Proficiency in English) with a minimum level of C1;
  - g. MELAB (Michigan English Language Assessment Battery) with a score of 77;
  - h. TOEIC (Test of English for International Communication) with a score of 745;
  - i. Bachelor's degree earned from a regionally accredited U.S. institution of higher education within the last three years.

### ► Prerequisites

#### MBA Program

You must complete 18 hours of prerequisites with an average grade of B or better before you can be admitted into the MBA program. You must have successfully completed the following courses within the last five years:

- Financial Accounting: 3 credit hours
- Survey of Economics or Microeconomics: 3 credit hours
- Business Finance\*: 3 credit hours
- Business Statistics: 3 credit hours
- Principles of Marketing\*: 3 credit hours
- Principles of Management\*: 3 credit hours

Courses marked with an asterisk (\*) are junior courses taught at the 300 level or above.

#### Master of Accountancy Program

Applicants to the Master of Accountancy program must have successfully completed 18 hours in accounting in addition to the prerequisites listed above. Courses should include such areas as: Intermediate Accounting, Auditing, Cost Accounting, Accounting Information Systems, Tax and Commercial Law. Non-business applicants should contact the Wall College of Business to ensure that they have taken or are taking the proper coursework.

### Application Deadlines

Applications are accepted year-round but priority consideration for admission will be given to those completed applications received by the following dates:

Term	Application postmark deadline
Fall Semester	June 15
Spring Semester	November 15
Summer	April 15

**IMPORTANT TELEPHONE NUMBERS:** Wall College of Business Graduate Admissions Office • 843-349-2469 (International: +1 843 349 2469)  
Financial Aid and Scholarships • 843-349-2313 (International: +1 843 349 2313)

**Office of Graduate Studies • Coastal Carolina University • P.O. Box 261954 • Conway, SC 29528-6054 USA**

843-349-2394 • 800-277-7000 • 843-349-6444 fax • graduate@coastal.edu • coastal.edu/graduate  
(INTERNATIONAL) Tel.: +1 843 349 2394 • Fax: +1 843 349 6444 • graduate@coastal.edu • coastal.edu/graduate



# Application for Graduate Admission

## E. Craig Wall Sr. College of Business Administration

A non-refundable application fee of \$45 is required with this application.

**INSTRUCTIONS:** Pages 2-5 of this document MUST be completed online using the computer keyboard. Then, print the entire document, sign and date pages 4 and 5, and mail or bring pages 2-5 to the Office of Graduate Studies. Forward the printed *Letter of Recommendation* forms to the individuals of your choice and ask them to complete and forward each Letter of Recommendation to the Office of Graduate Studies.

1. I WISH TO BEGIN GRADUATE STUDY AT COASTAL CAROLINA UNIVERSITY. YEAR \_\_\_\_\_  FULL TIME  PART TIME  
 FALL SEMESTER  SPRING SEMESTER  SUMMER I  SUMMER II

2. SOCIAL SECURITY NUMBER \_\_\_\_\_  
INTERNATIONAL STUDENTS – Passport number \_\_\_\_\_ Country of issuance \_\_\_\_\_

3. LEGAL NAME \_\_\_\_\_  
Last First Middle Suffix (Jr., III, IV)

4. MAIDEN OR FORMER NAME USED AT OTHER COLLEGES \_\_\_\_\_

5. PERMANENT ADDRESS  
P.O. Box, RFD or Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Postal zip code \_\_\_\_\_ Zip +four \_\_\_\_\_  
County \_\_\_\_\_ Province \_\_\_\_\_ Country \_\_\_\_\_

6. TELEPHONE: Home ( \_\_\_\_\_ ) \_\_\_\_\_ Mobil ( \_\_\_\_\_ ) \_\_\_\_\_

7. E-MAIL ADDRESS \_\_\_\_\_

8. BIRTH DATE (MM/DD/YY) \_\_\_\_\_ 9. Gender:  Male  Female

10. I AM A SENIOR CITIZEN (age 60 or older).  Yes  No

11. ETHNIC ORIGIN / RACE  
I am Hispanic or Latino.  Yes  No  
**What is your race?** Regardless of how you answered the prior statement, please indicate the race you consider yourself to be.  
 American Indian OR Alaskan Native  Asian  Black/African American  
 Native Hawaiian OR Other Pacific Islander  White

12. DO YOU LIVE IN SOUTH CAROLINA?  
 Yes If Yes, you must complete page 5 of this application. **If all questions are not answered completely, you will be considered an OUT-OF-STATE student for Tuition and Fee purposes.**  
 No I should not be considered a South Carolina resident for Tuition and Fee purposes.

13. COUNTRY OF BIRTH \_\_\_\_\_ COUNTRY OF CITIZENSHIP \_\_\_\_\_

14. I AM A PERMANENT RESIDENT ALIEN OF THE UNITED STATES.  Yes  No  
If Yes, what is your alien registration number \_\_\_\_\_ Attach a copy of your Green Card.

15. I AM AN INTERNATIONAL STUDENT.  Yes  No  
I am seeking an F-1 Student Visa.  Yes  No

16. EMERGENCY CONTACT INFORMATION Check relationship to you:  Parent  Spouse  Guardian  Other \_\_\_\_\_  
Name \_\_\_\_\_  
Last First Middle Suffix (Jr., III, IV)  
Home/permanent address: P.O. Box, RFD or Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Postal zip code \_\_\_\_\_ Zip +four \_\_\_\_\_  
County \_\_\_\_\_ Province \_\_\_\_\_ Country \_\_\_\_\_  
Telephone: Home ( \_\_\_\_\_ ) \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_ Mobil ( \_\_\_\_\_ ) \_\_\_\_\_

17. **DEGREE SOUGHT**

- M.B.A.       Master of Accountancy       Certificate in Business Foundations       Certificate in Fraud Examination

18. Did you participate in CCU's "Degree in Three" program?      YES      NO

19. **TESTS:** Give dates you have taken or will take the tests.

Graduate Management Admissions Test (GMAT):      **DATE 1** (MM/DD/YY) \_\_\_\_\_      **DATE 2** (MM/DD/YY) \_\_\_\_\_

Test of English Proficiency:      **DATE 1** (MM/DD/YY) \_\_\_\_\_      **DATE 2** (MM/DD/YY) \_\_\_\_\_

20. **COLLEGE(S) ATTENDED** List below all colleges attended, current or most recent first, and ask the institution(s) to forward an official transcript of your work directly to the Office of Graduate Studies, Coastal Carolina University, P.O. Boxes 261954, Conway, South Carolina 29528-6054 USA.

Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_

Date entered (MM/YY) \_\_\_\_\_ Date leaving (MM/YY) \_\_\_\_\_ Degree earned \_\_\_\_\_

Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_

Date entered (MM/YY) \_\_\_\_\_ Date leaving (MM/YY) \_\_\_\_\_ Degree earned \_\_\_\_\_

Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_

Date entered (MM/YY) \_\_\_\_\_ Date leaving (MM/YY) \_\_\_\_\_ Degree earned \_\_\_\_\_

Name of school (full name) \_\_\_\_\_ State \_\_\_\_\_

Date entered (MM/YY) \_\_\_\_\_ Date leaving (MM/YY) \_\_\_\_\_ Degree earned \_\_\_\_\_

**FOR INTERNATIONAL APPLICANTS**

21. **ARE YOU CURRENTLY STUDYING IN THE UNITED STATES?**       YES       NO      If Yes, you must submit an International Clearance Form.

**ALL INTERNATIONAL STUDENTS ON F-1 STUDENT VISAS ARE REQUIRED TO SUBMIT THE FOLLOWING FORMS:**

- Confidential Financial Statement
- Letter of Guarantee

The Confidential Financial Statement, the Letter of Guarantee and the International Student Clearance Form can be obtained online at: [coastal.edu/graduate/forms/html](http://coastal.edu/graduate/forms/html).

22. **COMMUNITY STANDARDS**

Effective June 1, 2009, all applicants are required to submit complete responses to a series of community standards questions on the application for admission. Responses to these questions are initially reviewed by the Office of Graduate Studies. Some cases are then referred to the Community Standards Committee for review. An applicant must satisfy the Community Standards portion of the admission application prior to the review of the documentation (transcripts, test scores, letters of recommendation, etc.). This review process supports the University's goal of maintaining a safe learning community. Failure to submit complete responses or the falsification of responses will result in the revocation of the admission decision or the dismissal of the student after enrollment. It is the responsibility of the applicant/student to notify the Office of Graduate Studies of changes to the questions on Community Standards. Disclosure is a continuous obligation of the applicant/student. Failure to do so shall result in immediate and permanent dismissal. In addition, Coastal Carolina University will not permit Registered Sex Offenders to enroll in classes or to participate in campus activities. The failure to disclose registration shall result in immediate expulsion and revocation of any privileges as a student. For the purpose of the following questions, "crime" or "criminal charge" refers to any crime other than a traffic-related misdemeanor or infraction. You must, however, include alcohol or drug offenses whether or not they are traffic-related.

If you answer "Yes" to any question below, you are required to provide your own written explanation of the event(s) and a statement from your legal representative summarizing the event(s) and the final disposition of your case. If you are/were not represented by legal counsel in connection with the event(s), in addition to your own written explanation, you must provide court records summarizing the event(s) and the final disposition of your case. Print your full name at the top of each page, and date and sign each page. All documentation must be delivered to the Office of Graduate Studies.

1.     YES     NO      Have you been convicted of a crime as an adult or juvenile?
2.     YES     NO      Have you entered a plea of guilty, a plea of no contest, a plea of "nolo contendere," an Alford plea, a plea of delinquency in juvenile court, or have you received a deferred prosecution or prayer for judgment continued to a criminal charge?
3.     YES     NO      Have you otherwise accepted responsibility for the commission of a crime or entered a pre-trial/diversion program?
4.     YES     NO      Do you have any criminal charges pending against you?
5.     YES     NO      Have you ever been suspended (out-of-school), expelled or placed on disciplinary probation by any college or university? This may include, but is not limited to, academic cheating, conduct violations or alcohol policy infractions. If you answer "Yes," you are required to attach a statement from an appropriate school official corroborating your summary of the event in addition to your own explanation of the event.
6.     YES     NO      If you have ever served in the military, did you receive any type of discharge other than an honorable discharge? **If you have not served in the military, respond "No."**

**Written statement (required for all "Yes" responses). Attach an additional sheet of paper if necessary.**

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COMMUNITY STANDARDS (continued)

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23. HOW DID YOU FIRST LEARN ABOUT COASTAL CAROLINA UNIVERSITY'S BUSINESS PROGRAMS?

- Mailing, Live in area, Alumni of CCU, Current Student at CCU, Employer, CCU Web site, Newspaper, Radio, Graduate/Career Fair, Web search, Other

Explain \_\_\_\_\_

24. APPLICATION AGREEMENT

I certify that these responses are true and complete to the best of my knowledge, pursuant to reasonable inquiry where needed, and I am aware that any knowing omissions or falsification herein may result in disciplinary action including denial of admission or dismissal after admission.

My signature below is my promise that, should I enroll at Coastal Carolina University, I will abide by all rules and policies of the Code of Student Conduct and Academic Responsibilities as outlined in the University's Student Handbook.

Print name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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9/15

APPLICATION FEE: Credit card authorization for payment of the application fee. Complete this section only if you are paying the application fee by credit card.

Please PRINT clearly.

Check one: [ ] Mastercard [ ] Visa [ ] Discover [ ] American Express

Name (Print name as it appears on credit card) \_\_\_\_\_

Credit card number \_\_\_\_\_

Expiration date \_\_\_\_\_ V-code \_\_\_\_\_

For Mastercard, Visa or Discover the V-code is the last three numbers in the signature line on the back of the card.
For American Express the V-code is a four-digit number on the front right side of the card.

I authorize the use of my credit card account. AMOUNT \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Daytime telephone ( \_\_\_\_\_ ) \_\_\_\_\_

# COASTAL CAROLINA UNIVERSITY RESIDENCY INFORMATION

Applicants who claim South Carolina residence for tuition and fee purposes must complete this form in its entirety. Additional information may be requested per SC Law 59-112. South Carolina residency requirements may be found online at [che.sc.gov](http://che.sc.gov).

## Student Information

Name of Student \_\_\_\_\_ Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Social Security number or CCU ID \_\_\_\_\_ Email \_\_\_\_\_

Date of birth \_\_\_\_\_ State and country of birth \_\_\_\_\_

### OPTION A: DEPENDENT STUDENT

A dependent student is defined as one who will receive more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment from a parent, guardian or spouse and will be claimed as a dependent or exemption on that individual's income tax returns.

With whom do you reside?  Self  Both parents  
 Father  Mother  Other \_\_\_\_\_

Who claims you for federal income tax purposes?  Self  Both parents  
 Father  Mother  Other \_\_\_\_\_

Parents' marital status:  Single/never married  Married  
 Divorced/separated  Widowed  Re-married

If parents are divorced or separated, who is the custodial parent?  
 Not applicable  Father  Mother  Shared custody

**Dependent students are required to enter parent, guardian or spouse information below.**

Who provides the majority of your financial support?

Name \_\_\_\_\_  
*First Last Relationship*

Citizenship:  U.S. citizen  Permanent Resident  Not a U.S. Citizen or Permanent Resident

Length of time as SC resident: Years \_\_\_\_\_ Months \_\_\_\_\_

Address: Street \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_

Driver's License: State \_\_\_\_\_ Date Issued \_\_\_\_\_  
 New  Renewed Expiration date \_\_\_\_\_

Vehicle Registration: State \_\_\_\_\_ Date Issued \_\_\_\_\_  
 New  Renewed Date of purchase (MM/YYYY) \_\_\_\_\_

If you have relocated to SC, what was your previous state of residence?  
\_\_\_\_\_

Employment Status:  Full-time  Part-time  
 Unemployed  Retired  Disabled

Employer's name \_\_\_\_\_  
Employer's address \_\_\_\_\_

Employer's telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

If your claim to South Carolina resident status is based upon active military assignment to the state, **please submit a copy of current orders to the Office of Admissions.**

Person on active duty in service:  Parent/Guardian  Spouse

Branch of Service:  USAF  USA  USN  USMC  USCG

### OPTION B: INDEPENDENT STUDENT

Independent students are required to enter personal information below. An independent student is defined as one who will provide more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment and will NOT be claimed as a dependent or exemption on the income tax return of a parent, guardian or spouse.

#### YOUR INFORMATION

Name \_\_\_\_\_  
*First Last Relationship*

Citizenship:  U.S. citizen  Permanent Resident  Not a U.S. Citizen or Permanent Resident

Length of time as SC resident: Years \_\_\_\_\_ Months \_\_\_\_\_

Address: Street \_\_\_\_\_  
City, State, Zip code \_\_\_\_\_

Your marital status:  Single/never married  Married  
 Divorced/separated  Widowed  Re-married

Current Residence:  Rent/lease  Own  With Parents  
 Campus residence

Driver's License: State \_\_\_\_\_ Date Issued \_\_\_\_\_  
 New  Renewed Expiration date \_\_\_\_\_

Vehicle Registration: State \_\_\_\_\_ Date Issued \_\_\_\_\_  
 New  Renewed Date of purchase (MM/YYYY) \_\_\_\_\_

If you have relocated to SC, what was your previous state of residence?  
\_\_\_\_\_

Employment Status:  Full-time  Part-time  
 Unemployed  Retired  Disabled

Employer's name \_\_\_\_\_  
Employer's address \_\_\_\_\_

Employer's telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

If your claim to South Carolina resident status is based upon active military assignment to the state, **please submit a copy of your current orders to the Office of Admissions.**

Branch of Service:  USAF  USA  USN  USMC  USCG

Home of record \_\_\_\_\_

I certify that all information provided is accurate and complete. I further understand that falsification or failure to provide the correct information may lead to the disqualification of my application for admission to Coastal Carolina University.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_  
(If applicant is under 18 years of age)



# Recommendation for Graduate School Admission

E. Craig Wall Sr. College of Business Administration

**TO BE COMPLETED BY APPLICANT:**

Legal name \_\_\_\_\_  
Last First Middle or Maiden

Social Security number \_\_\_\_\_

International students – Passport number \_\_\_\_\_

If you prefer this to be a confidential letter of reference, you must sign and date the waiver of access below.

**APPLICANT'S WAIVER OF RIGHT OF ACCESS TO CONFIDENTIAL STATEMENT**

Under the Family Rights and Privacy Act of 1974, a student enrolled at Coastal Carolina University has access to his or her educational records. The University's record policies comply with this law, while still allowing the student the option of waiving the right of access. To waive the right to examine this recommendation, please sign below. If left unsigned, you will have access to this document upon enrollment at Coastal Carolina University. The decision you make in no way affects the consideration of your application.

I hereby waive my right of access to any information contained on this recommendation form.

Signed \_\_\_\_\_ Date \_\_\_\_\_

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## Letter of Recommendation Request

You have been listed as a reference for the applicant above who is applying for Graduate Admission at Coastal Carolina University. Please complete this form at your earliest convenience as the applicant's record cannot be reviewed without this information. This form may be examined by the applicant upon request unless the Waiver of Access above is signed.

**Please return this completed form to the Office of Graduate Studies, Coastal Carolina University, P.O. Box 261954, Conway, SC 29528-6054 USA.**

**TO BE COMPLETED BY RECOMMENDER:**

Date \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

1. Knowledge of the Applicant

• Approximately how long have you known the applicant? Years \_\_\_\_\_

• How well do you feel you know the applicant?  Casually  Well  Very well

• What is the nature of your contact with the applicant?

Teacher in one class

Major adviser

Employer

Teacher in more than one class

Research adviser

Other (specify) \_\_\_\_\_

(continued)

**Recommendation for Graduate School Admission • Page 2**

2. Give your opinion of the applicant's qualifications (i.e., intellectual ability, academic preparation, motivation, work habits) for graduate work.

3. Where would you rank this student with other seniors who are currently in your department?

***Faculty recommendations only***

lower 25%

middle 25%

upper 25%

highest 10%

highest 5%

4. Additional remarks. ***Use an additional sheet of paper if necessary.***



# Recommendation for Graduate School Admission

E. Craig Wall Sr. College of Business Administration

**TO BE COMPLETED BY APPLICANT:**

Legal name \_\_\_\_\_  
*Last First Middle or Maiden*

Social Security number \_\_\_\_\_

International students – Passport number \_\_\_\_\_

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I hereby waive my right of access to any information contained on this recommendation form.

Signed \_\_\_\_\_ Date \_\_\_\_\_

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**TO BE COMPLETED BY RECOMMENDER:**

Date \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

1. Knowledge of the Applicant

- Approximately how long have you known the applicant? Years \_\_\_\_\_
- How well do you feel you know the applicant?  Casually  Well  Very well
- What is the nature of your contact with the applicant?
 

<input type="checkbox"/> Teacher in one class	<input type="checkbox"/> Major adviser	<input type="checkbox"/> Employer
<input type="checkbox"/> Teacher in more than one class	<input type="checkbox"/> Research adviser	<input type="checkbox"/> Other (specify) _____

(continued)



**Recommendation for Graduate School Admission • Page 2**

2. Give your opinion of the applicant's qualifications (i.e., intellectual ability, academic preparation, motivation, work habits) for graduate work.

3. Where would you rank this student with other seniors who are currently in your department?

***Faculty recommendations only***

lower 25%

middle 25%

upper 25%

highest 10%

highest 5%

4. Additional remarks. ***Use an additional sheet of paper if necessary.***