# **Graduate Certificate Programs Application for Admission**



# Thank you for your interest in Excelsior College.

Your first step toward your degree is to complete this application. Please read it carefully and fill out each section completely. If you have any questions as you're completing this application, please call the Office of Registration and Records at 888-647-2388, ext. 141 (or 518-464-8500 if calling from outside the U.S. or Canada).

#### **Required Documents**

You are required to submit **official** transcripts as part of the application process. Official transcripts/ documents are those that a college, testing agency, or education office submits directly to Excelsior College, Office of Registration and Records, 7 Columbia Circle, Albany, NY, 12203-5159. Official transcripts must include: the institution's official seal; registrar's signature (this is usually a stamp); and two forms of student identification (e.g., Social Security number and current address, or current address and date of birth). **NOTE: The issuance date of the transcript must be within three weeks or less.** Do not submit unofficial copies as they cannot be used to evaluate your prior credits.

#### Important Student Resources Available Online

The Student Policies Web page is a resource for understanding the general academic and administrative policies that are important to academic success. The policies cover a wide range of information, including important federal policies such as your right to privacy, policies governing student conduct, grading policies, and other helpful information. Access the policies directly at <a href="https://www.excelsior.edu/student-policies">www.excelsior.edu/student-policies</a>. **Policies and procedures that only apply to a specific degree program are described in the appropriate school catalog.** 

You can access most of our student resources, including school catalogs, the student policies, the

Using Exams to Complete Your Excelsior College Degree guide, and other information, including fees, payment options and plans, and financial aid information, at our website. Visit <a href="www.excelsior.edu/publications">www.excelsior.edu/publications</a> to access our most frequently downloaded publications. Enroll online at <a href="www.excelsior.edu/enroll">www.excelsior.edu/enroll</a>.

# School of Business & Technology Candidates

Please direct any questions you may have as you are completing this application to the Office of Registration and Records by calling 888-647-2388, ext 141.

#### **School of Nursing Candidates**

You are required to provide evidence of your active RN license (photocopy of license or letter from your state board of nursing).

International students must demonstrate that they have an equivalent U.S. Registered Nurse (RN) licensure (see page 6).

#### **Financial Aid**

Students enrolled in a stand-alone certificate program are not eligible for Federal Student Aid (FSA). However, students enrolled in both a degree program and a certificate program may be eligible to have FSA apply toward the certificate courses provided these courses are applicable toward the degree requirements. To be considered for scholarship aid, complete the FAFSA (Free Application for Federal Student Aid) at <a href="http://www.fafsa.ed.gov/">http://www.fafsa.ed.gov/</a>. The FAFSA code for Excelsior College is 014251.

For more information on available financial aid options, visit **www.excelsior.edu/financialaid**.

continued

Excelsior College reserves the right to verify all transcripts/documents received to ensure authenticity. Submission of fraudulent documents will result in academic dismissal from the College.

#### **International Transcripts**

For evaluation of credentials from outside of the United States, you must use ONE of the following approved agencies:

■ Educational Credentials Evaluators, Inc. (ECE): Order a Subject Analysis Report by visiting www.ece.org/excelsior or calling 414-289-3400.

#### **OR**

- World Education Services (WES): Order a comprehensive course-by-course report by visiting www.wes.org or calling 212-966-6311.
- \* Please note: If you have had an evaluation completed by WES and did not specifically note it was needed for Excelsior College, you must request an update to your evaluation by WES prior to submitting to Excelsior College.

#### **International Candidates**

International candidates from non-English speaking countries must show evidence of sufficient English language proficiency through one of the following three options:

- 1. Submission of TOEFL (Test of English as a Foreign Language) or IELTS (International English Language Testing System) taken within the last two years.
- 2. Successful completion of Excelsior College's ENGx111: English Composition or the UExcel ENGx110 College Writing examination.
- 3. Submission of evidence of the successful completion of at least nine credit hours of academic work in courses delivered in English at an institution of higher education in the United States.

## We look forward to working with you.

Excelsior College reserves the right to verify all transcripts/documents received to ensure authenticity. Submission of fraudulent documents will result in academic dismissal from the College.



## **Graduate Certificate Programs Application for Admission**

For Office U	se
Special Popu	ulation
Third Party	

Please print or type all information requested and review responses for accuracy. **Social Security Number (USA) Current Legal Name** Last Name First Name Middle Initial Birth/Maiden Name (if different from current last name) Other name(s) by which you may have been identified in relevant academic records **Permanent Address** Number and Street (include Rd. St., Ave., etc., as well as Apt. or Suite number if applicable) City Country (if not USA) State Zip Code Phone Numbers with Area Code (please indicate "D" for day or "E" for evening): (Home) (Business Extension) (Business) **Email Address** Do you wish to receive Excelsior College updates via email broadcasts? Yes, I would like to subscribe to this service. No, I do not wish to subscribe at this time. If you answer yes to subscribe to this service, be sure to add no-reply@excelsior.edu, TechSupport@excelsior.edu, or the excelsior.edu mail server to your email software's address book or allowed list. If you are using a spam filter or blocker that requires confirmation from the sender or is set to reject email from certain domains, this procedure is necessary in order to ensure that your receive Excelsior College correspondence. Date of Birth (mm/dd/yyyy format) Gender (M = male, F = female) Have you ever been enrolled in any program at Excelsior College (formerly Regents College)? No ☐ If yes, when? Enter the code number that represents your estimate of the total number of graduate credits you have earned through college courses, proficiency tests, military courses, and so forth. 1 No credit/courses 2 1-6 credits **3** 7–15 credits 16-30 credits **5** over 30 credits Please select the one response which best reflects your citizenship status. U.S. citizen U.S. permanent resident Foreign national ☐ No Do you plan to apply for financial assistance to include tuition assistance, institutional aid, scholarships, private loans, or federal aid? Yes No No If eligible for tuition assistance, are you planning to use it at Excelsior College? Yes \( \square\) No \( \square\)

If y	ou are currently serving	in the U	nited States Armed Services,	please	enter the code number of	the B	ranch:
10 15 20 25	Army – Regular Army – Reserves Navy – Regular Navy – Reserves	30 35 40 45	Marines – Reserves Air Force – Regular	50 55 60 65			
Oth	er military status:	Military	veteran	/ mem	ber with DoD card		
		Dept. o	f Defense civilian employee		I am no longer affiliated wit	h the	military
	Milit	tary ID r	number:				
lf y	ou are eligible or current	ly recei	ving GI Bill benefits, please en	ter the	code number of the chapt	er:	
75 80	MGIB-AD (Chapter 30) MGIB-SR (Chapter 1606) REAP (Chapter 1607) VEAP (Chapter 32)		Educational Assistance Test Program (Section 901) Educational Assistance Pilot Program (Section 903)		Survivors' and Dependents' Educational Assistance Program (Chapter 35)	115	Post-9/11 (Chapter 33) Vocational Rehabilitation Not sure
Hav	e you used your benefits	previou	usly? Yes 🗌 No 🔲 If not	, have	you completed VA form 22-	1990	? Yes 🗌 No 🗌
lf y	ou have used your benefi	its and a	are changing parent schools, h	ave yo	ou completed VA form 22-19	995?	Yes □ No □
If y	ou answered <b>No</b> , please	comple	te the correct form online at ${f v}$	ww.g	ibill.va.gov.		
-	ou have Chapter 31 Vocat mitted to the Bursar's Of		ehabilitation benefits, a 28-190 third party billing.	5 form	n must be completed by you	r educ	cation counselor and

Certificate Program Information			
Enter an "X" in the box next to the program  SCHOOL OF BUSINESS & TECHNOLOGY	in which you are enrolling. Select on SCHOOL OF NURSING	ly one program.	
Graduate Certificate in Cybersecurity Management	Graduate Certificate in Nursing Leadership and Administration Health Care Systems		
	Post-Master's Certificate in Nu Education	ırsing	
Documents Submitted for Evaluation			
Transcripts*			
List below each institution that will be subm be used to evaluate your prior credits. Official submits directly to:			
Excelsior College Office of Registration and Records 7 Columbia Circle Albany, NY 12203-5159			
NOTE: The issuance date of the transcript (e.g., SS# and current address, current address)			-
Official transcripts must be submitted by the behalf. Excelsior College reserves the right to documents will result in academic dismissal	o verify all transcripts/documents re		
Name of College/University			City/State
*Note: Noncing comments of the first	tutions other than Everlain Called		
*Note: Nursing courses completed at insti	tutions other than Excelsior Colleg	ge are only evaluated up	on enrollment.
Electronic Delivery of Academic Evaluations			
Whenever the College evaluates the credits how credits earned will apply toward your ac time your academic plan is updated, and you Please make certain that you complete your	ademic program and which credits y u can view this document at the Exc	ou still need to earn. We elsior College website co	e will notify you via email each onveniently and without delay.
If you do not wish to receive electronic check this box to receive this documen		η,	
Employer Information			
Employer Name:			
Job Title:			
Number and Street			Apt. or Suite Number
011		7: 0	
City	State	Zip Code	Country (if not USA)

#### Signature and Date (signature and date required)

I certify that the above statements are true and correct. I understand that false information or documents may result in dismissal from the College; and that it is my responsibility to submit a complete application package. I agree that if accepted for enrollment in the College, I will comply with and be bound by all requirements and policies of the College, as set forth in this Graduate Certificate Application for Admission, the student policies, and the catalog pertaining to the program in which I am seeking to enroll. I have also read and understand the application fee refund policy included in the Graduate Tuition and Fee Schedule.

Signature:	Date:
Demographic Information	
Please answer both questions (a) and (b) below.	
(a) Are you Hispanic or Latino/Latina? Yes $\Box$ No	
(b) Please select the racial/ethnic group(s) you identify more than one):	with regardless of your answer to the above question (you may select
	African American
Please check the appropriate box(es) for any degree(s) you ha	ve already earned. $\square$ Associate $\square$ Baccalaureate $\square$ Master's
Did not finish high school	other     Father
Checklist of Application Materials	
☐ Application fee ☐ This completed application  Baccalaureate degree transcript: ☐ My baccalaureate degree was obtained through Regel I do not need to submit an official transcript for my upon	ents College/Excelsior College.
☐ My baccalaureate degree transcript from ☐ is enclosed ☐ has been requested	(institution name)
Official transcript of baccalaureate-level coursework and,	or degree
☐ Photocopy of RN license or a letter from your state boa	rd of nursing confirming your active registration. e an equivalent U.S. Registered Nurse (RN) licensure (see page 6).

When you submit this Graduate Certificate Programs Application for Admission, be sure to include payment of the current application fee (refer to the graduate fee schedule). If you are unsure of the current fee, please contact us toll free at 888-647-2388 (ext. 27). Make your check or money order payable to Excelsior College in U.S. dollars drawn on a U.S. bank, or complete the charge card authorization below. Do not send cash. This fee is nonrefundable. All fees are subject to change without notice.    Payment in full is attached for the Excelsior College Graduate Certificate Programs Application for Admission Fee (check, money order, or completed charge card authorization).    Credit Card Authorization:
application fee (refer to the graduate fee schedule). If you are unsure of the current fee, please contact us toll free at 888-647-2388 (ext. 27). Make your check or money order payable to Excelsior College in U.S. dollars drawn on a U.S. bank, or complete the charge card authorization below. Do not send cash. This fee is nonrefundable. All fees are subject to change without notice.  Payment in full is attached for the Excelsior College Graduate Certificate Programs Application for Admission Fee (check, money order, or completed charge card authorization).  Credit Card Authorization:  I authorize Excelsior College to charge (or the current fee — refer to the graduate fee schedule — at the time this form is received by Excelsior College) to my:
(check, money order, or completed charge card authorization).  Credit Card Authorization:  I authorize Excelsior College to charge (or the current fee — refer to the graduate fee schedule — at the time this form is received by Excelsior College) to my:
I authorize Excelsior College to charge (or the current fee — refer to the graduate fee schedule — at the time this form is received by Excelsior College) to my:
Credit Card Account Number: Expiration Date:
Name of Cardholder (print):
Signature:
Mail your completed application, payment, and all official documents to:  Bursar's Office  Excelsior College 7 Columbia Circle Albany, NY 12203-5159  FAX: 518-464-8700

<sup>\*</sup>Official documentation/transcripts must be mailed. They will not be accepted if sent by FAX.

#### International Nurses School of Nursing Candidates

In addition to official transcripts, nursing candidates must demonstrate that they have an equivalent U.S. Registered Nurse (RN) licensure. To be eligible for admission, the applicant must be a graduate from an approved school of nursing in their country of education and hold a current, unencumbered nursing license (if licensed in multiple jurisdictions and/or countries, all licenses must be unencumbered). All nursing school transcripts and all licenses will be validated by primary source verification.

International candidates must apply to the Commission on Graduate of Foreign Nursing Schools (CGFNS) New York Credential Verification Service (NYCVS) and the New York State Education Department (NYSED) to have their foreign nursing education evaluated and approved by the aforementioned organizations. For more information, visit

#### http://www.cgfns.org/sections/programs/cvs/

Since the NYSED only issues an official NCLEX eligibility document to applicants directly, and will not send the document to Excelsior College, international applicants must forward the unopened official NCLEX eligibility document to Excelsior College. When international applicants receive the official NYSED document in its sealed envelope, they must insert the unopened envelope into an outer envelope and forward it to Excelsior College. International applicants should also write their full name, permanent address, and date of birth on the outer envelope.

The evaluation of credentials from outside the United States, all applicants must use one of the approved agencies noted previously. CGFNS New York Credential Verification Service (NYCVS) and the International Consultants of Delaware (ICD) Course by Course Services are offering Excelsior College applicants a discount when using their combined services. This bundle service package represents significant savings with a discount being applied to the ICD

Course by Course Service. This one-stop service helps applicants reduce expenses and save time in completing all the required procedures necessary for admission. If applicants choose to apply for NYCVS and the Course by Course Service separately, they will pay the full price. Applicants who wish to take advantage of this bundle service package must visit

#### https://www.cgfns.org/cerpassweb/contactUs.do

and submit their questions to Ms. Janette McCoy at CGFNS. After connecting to the Web page, please follow the instructions below to submit your questions.

- Ignore the error or warning texts in red.
- For the "Who are you?" question, please select "Other" from the dropdown list.
- Answer the questions by providing your first name, last name, and email address.
- Select "Credential Verification Service for New York State" radio button under "Service."
- Select the last option "NY/Excelsior" from the dropdown list under "Subject."
- Type in your questions or comments, then click "Submit Form" button. Your email will be directed to Ms. Janette McCoy's attention at CGFNS.

All official documents must be in sealed envelopes from the original source. In the event that Excelsior College receives an opened document, it will be considered unofficial and will not be considered for eligibility or evaluation; the opened document will be returned to the applicant. In this case, it becomes the applicant's responsibility to contact NYSED or ICD and request another official copy to be forwarded, unopened, to Excelsior College by the applicant.



7 Columbia Circle • Albany, New York 12203-5159 518-464-8500 • Toll Free: 888-647-2388 • TDD 518-464-8501

www.excelsior.edu

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