



UNIVERSITY of  
SAN FRANCISCO



master of arts in

# international studies

College of Arts and Sciences





# Application for Graduate Admission to the Master of Arts in International Studies

## Who May Apply

Applicants who hold a Bachelor's degree in any field.

## Length of Program

Students may complete the program in three or four semesters.

## GRE Scores

The GRE is not required for admission.

## Language Requirement

Successful completion of a second-semester non-English language course (equivalent to a second-semester language course at USF) is required for admission. By completion of the MAIS program, students are required to show proficiency in a non-English language at intermediate level two (fourth-semester language course at USF).

## Application Deadline

The priority application deadline is **February 15** for fall (August) admission. Applications are considered only on a space-available basis after that date.

It is best to apply as early as possible since student enrollment in the program is limited. Only complete applications (**including the Certification of Finance**) will be reviewed for admission. Once the new cohort (class) is filled, later qualified applicants may be placed on a waiting list.

## Application Items

### FIRST STEP: Application Form and Fee

Submit the form and application fee (\$55; payable to the University of San Francisco) online at [www.usfca.edu/grad/applyonline](http://www.usfca.edu/grad/applyonline) or by mail. Submit this form **first** in the application process.

Send all application items to the Office of Graduate Programs. Do not send application items to the Department of International Studies.

Please ensure that the full name on your application form and each application item are identical. If your names differ in any way, include a note with your application items so that the Office of Graduate Programs can match your items to your application file. Also, include the name of your graduate program on each application item and your birthdate.

### Transcripts

Submit one official transcript (academic record) from each university, college (university-level), or community college that you have attended. International students also need to submit a copy of the transcript and diploma (document that indicates that a Bachelor's Degree has been completed) in the original language and in English translation.

### Letters of Recommendation

Recommendation letters are required from two individuals who can attest to your competence and ability to succeed in the studies, research, and writing required for this graduate program. One letter must be from a professor.

### Résumé

Submit an updated résumé that describes your work experience.

### Statement of Purpose

A 2- to 3-page typewritten, double-spaced statement of purpose that describes your academic background, reasons for applying to the M.A. in International Studies program, any international experience, and your educational and career goals.

## International Students

*(Not a Citizen or Permanent Resident of the U.S.)*

Visit [www.usfca.edu/asinternational](http://www.usfca.edu/asinternational) for important information for international applicants, including test score policies. Non-immigrant students must include a **non-U.S. mailing address**. In addition to the application items listed above, international students need to submit the following:

### English Language Exams

Submit official TOEFL, IELTS or PTE exam scores. A minimum TOEFL of 90 (iBT) or 575 (PBT) or minimum IELTS score of 6.5 is required. Do not submit an application if you did not achieve these minimums. The USF school code for TOEFL is **6996** or **4850**.

### Certification of Finances

*(Required in Application—Please Read Carefully)*

International applicants who require an F-1 student visa must verify that they (or sponsors) can fund their tuition and living expenses during studies in the U.S. This requires that the Certification of Finances form be completed and submitted along with bank statements to USF. Funds required for the program are indicated on the Certification form.

**Note:** If you do not submit a completed Certification of Finances form, then your application will not be considered for admission.

### Passport Photo Page

You can scan and upload a copy of your passport photo and personal information page as you apply online, or mail a copy with your other application items.

## Financial Assistance

A limited number of merit scholarships that partially cover tuition are offered. Both U.S. and international applicants are considered for this financial assistance when their admission application is reviewed. There is no separate application for this financial assistance.

U.S. citizens and permanent residents are eligible to apply for low-interest loans offered by the U.S. federal student loan program. For information visit [www.fafsa.ed.gov](http://www.fafsa.ed.gov) or contact USF's OneStop Office at (415) 422-2020 or [onestop@usfca.edu](mailto:onestop@usfca.edu). The USF school code for FAFSA is **001325**. Submit your FAFSA as early as possible, even before your admission decision is received.

## Submit All Application Items to:

**University of San Francisco  
College of Arts and Sciences  
Office of Graduate Programs  
2130 Fulton Street, HR 240  
San Francisco, CA 94117**

Once your application form is processed by the Office of Graduate Programs, a USF ID number and password will be emailed to you so that you may check your application status online. You can also contact the Office of Graduate Programs at 415.422.5101.

Some application documents (statement of purpose, resume, passport photo page, letters of recommendation, GRE test score report) can be scanned/emailed as a PDF (jpgs are not accepted) to [asapplication@usfca.edu](mailto:asapplication@usfca.edu). In your email subject heading, please include the type of document you are sending, such as "Resumé" or "Statement of Purpose" and include your full application name and graduate program in your email.

Scans of bank statements, Certification of Finance, transcripts or English language test scores are not accepted by email. These original documents must be mailed.



# University of San Francisco Application for Graduate Admission

Please submit this form as early as possible in your application process.

**FIRST STEP:** Your full name should be identical on all of your application items, along with the name of your graduate program and birthdate. International applicants should give their name as listed on their passport. If your name is not identical on all items, please notify the Office of Graduate Programs in the College of Arts and Sciences at [asgraduate@usfca.edu](mailto:asgraduate@usfca.edu) or 415.422.5101 to describe any other version of your name and on which application item(s) it appears.

## Program Information

**OPTIONAL** U.S. SOCIAL SECURITY NO. (FOR U.S. CITIZENS AND PERMANENT RESIDENTS): \_\_\_\_\_

Please refer to the Graduate Programs and Codes sheet located on the back cover to indicate to which program you are applying.

DEGREE: \_\_\_\_\_ PROGRAM: \_\_\_\_\_

PROGRAM CODE: \_\_\_\_\_ EMPHASIS (IF APPLICABLE): \_\_\_\_\_

TERM AND YEAR: \_\_\_\_\_ CAMPUS LOCATION: \_\_\_\_\_

Are you applying for a Joint Degree program? If so, indicate your program here \_\_\_\_\_

Are you currently enrolled in a USF graduate program? If so, indicate your program here \_\_\_\_\_

## Personal Information

**Legal Name** \_\_\_\_\_  
LAST/FAMILY NAME FIRST/GIVEN NAME MIDDLE/ADDITIONAL NAME

OTHER NAMES YOU MAY USE WHICH APPEAR ON SUPPORTING DOCUMENTS \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ GENDER:  MALE  FEMALE

### Present Mailing Address

**Effective Until:** \_\_\_\_\_  
STREET ADDRESS

( MONTH, DAY, YEAR ) CITY STATE ZIP OR POSTAL CODE

COUNTRY

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### Permanent Mailing Address (if different from above)

STREET ADDRESS

CITY STATE ZIP OR POSTAL CODE

COUNTRY

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## Names of Recommenders

\_\_\_\_\_  
LAST/FAMILY NAME FIRST/GIVEN NAME LAST/FAMILY NAME FIRST/GIVEN NAME

## Optional Statistical Information

### Religious affiliation (optional):

- BUDDHIST  
 HINDU  
 JEWISH  
 MUSLIM  
 PROTESTANT  
 ROMAN CATHOLIC  
 NO RELIGION  
 OTHER (PLEASE SPECIFY) \_\_\_\_\_

### Ethnic background (Optional):

*Please indicate whether you consider yourself to be Hispanic/Latino:*

- NOT HISPANIC or LATINO  
 HISPANIC or LATINO  
 CUBAN  
 MEXICAN  
 PUERTO RICAN  
 SOUTH AMERICAN  
 CENTRAL AMERICAN  
 OTHER SPANISH ORIGIN: \_\_\_\_\_  
 PREFER NOT TO DISCLOSE

### Racial background (Optional):

*Select one or more of the following categories to describe yourself:*

- NATIVE AMERICAN or ALASKA NATIVE  
 ASIAN  
 CHINESE  
 FILIPINO  
 JAPANESE  
 KOREAN  
 SOUTHEAST ASIAN  
 INDIAN  
 PAKISTANI  
 OTHER ASIAN ORIGIN  
 BLACK or AFRICAN AMERICAN  
 NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER  
 WHITE  
 WESTERN EUROPEAN  
 EASTERN EUROPEAN  
 MIDDLE EASTERN  
 NORTH AFRICAN  
 PREFER NOT TO DISCLOSE

## Citizenship or Residency Status

- U.S. CITIZEN   
  U.S. PERMANENT RESIDENT   
  REFUGEE IN U.S.   
  ASYLEE IN U.S.   
  NOT A U.S. CITIZEN OR PERMANENT RESIDENT

## International Students — Required Information

STATE/COUNTRY OF BIRTH: \_\_\_\_\_ COUNTRY OF CITIZENSHIP: \_\_\_\_\_

DO YOU PLAN ON MAINTAINING A VISA STATUS OTHER THAN F-1 STUDENT VISA?  NO  YES IF YES, WHAT VISA STATUS WILL YOU HOLD? \_\_\_\_\_

DO YOU PLAN ON BRINGING A SPOUSE AND/OR CHILD TO THE U.S. WITH YOU DURING YOUR STUDIES?  NO  YES

ARE YOU CURRENTLY ATTENDING A U.S. INSTITUTION OR COMPLETING OPTIONAL PRACTICAL TRAINING (OPT) ON AN F-1 VISA?  NO  YES

## Academic Background

*List chronologically all universities and colleges (university-level institutions) previously attended. List most recent first:*

CEEB CODE Admission use only	INSTITUTION NAME	LOCATION	DATES OF ATTENDANCE	DEGREE RECEIVED
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## Signature

*I certify that the statements in this application are true and complete to the best of my knowledge.*

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

## Return completed application and all application items to:

**University of San Francisco**  
**College of Arts and Sciences**  
**Office of Graduate Programs**  
**2130 Fulton Street, HR 240**  
**San Francisco, CA 94117**

The Taxpayer Relief Act of 1997 was enacted to provide credit against tax liability for amounts spent on qualified tuition expenses by the student and his/her family. Only those tuition expenses not covered by financial aid or by tuition or other benefits are eligible for the credit. We anticipate that the University will be asked to provide confirming information to the Internal Revenue Service on behalf of its students and/or their parents. If you or your parent(s) anticipate claiming Tuition Tax credits, please provide the following information about the person who will claim the credit.

Taxpayer name: \_\_\_\_\_  
 Taxpayer ID#: \_\_\_\_\_  
 Taxpayer address: \_\_\_\_\_  
 \_\_\_\_\_

The taxpayer is (check one):  the student  student's parents  other



# University of San Francisco Recommendation for Graduate Admission

## To the Applicant

Please fill out the following section and provide it to someone most able to evaluate your academic or professional ability. It is important that your reference include this form with their recommendation letter. If that is not possible, your recommender needs to include your full name (as it appears on your application form), birthdate and graduate program on their recommendation letter.

### Legal Name

\_\_\_\_\_  
LAST/FAMILY NAME FIRST/GIVEN NAME MIDDLE/ADDITIONAL NAME

### Date of Birth

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MONTH DATE YEAR

### Present Mailing Address

\_\_\_\_\_  
STREET ADDRESS  
\_\_\_\_\_  
CITY STATE ZIP OR FOREIGN MAILING CODE  
\_\_\_\_\_  
COUNTRY

### Graduate Program

\_\_\_\_\_  
(FOR EXAMPLE: ASIA PACIFIC STUDIES)

## Right of Access

I have requested that this form be used in the admission and counseling process of the University of San Francisco. I understand that the Family Education Rights and Privacy Act of 1974 allows me the option to choose whether I will, or will not, have the right to read this letter of recommendation. Accordingly, I choose the following option by checking the appropriate box:

- I waive access to this letter of recommendation  
I understand that it will remain confidential and that I will not have access to read it.
- I do not waive access to this letter of recommendation  
I retain my right to have access to read it during the admission process at the University of San Francisco

\_\_\_\_\_  
SIGNATURE OF APPLICANT DATE

## To the Recommender

The student whose name appears above is a candidate for admission to the University of San Francisco. We would value your candid appraisal of this applicant. Please complete the remainder of this form as soon as possible and return to the following address:

**University of San Francisco  
College of Arts and Sciences  
Office of Graduate Programs  
2130 Fulton Street, HR 240  
San Francisco, CA 94117**

## Letter of Recommendation

Please write a statement concerning the applicant's level of motivation, intellectual ability, creativity, communication skills and readiness for graduate studies. You may include a separate sheet for your evaluation, but please complete this form and include it with your evaluation.

How long have you known the applicant? \_\_\_\_\_

What is your relationship to the applicant? \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF RECOMMENDER

\_\_\_\_\_  
DATE

### Recommender Name

\_\_\_\_\_  
LAST/FAMILY NAME

\_\_\_\_\_  
FIRST/GIVEN NAME

\_\_\_\_\_  
MIDDLE/ADDITIONAL NAME

\_\_\_\_\_  
POSITION

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

### Institution/Organization

\_\_\_\_\_  
INSTITUTION/ORGANIZATION NAME

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP OR POSTAL CODE



## Letter of Recommendation

Please write a statement concerning the applicant's level of motivation, intellectual ability, creativity, communication skills and readiness for graduate studies. You may include a separate sheet for your evaluation, but please complete this form and include it with your evaluation.

How long have you known the applicant? \_\_\_\_\_

What is your relationship to the applicant? \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF RECOMMENDER

\_\_\_\_\_  
DATE

### Recommender Name

\_\_\_\_\_  
LAST/FAMILY NAME

\_\_\_\_\_  
FIRST/GIVEN NAME

\_\_\_\_\_  
MIDDLE/ADDITIONAL NAME

\_\_\_\_\_  
POSITION

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

### Institution/Organization

\_\_\_\_\_  
INSTITUTION/ORGANIZATION NAME

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP OR POSTAL CODE



Supplemental Application to the Master of Arts in  
**International Studies**

## Table of Programs and Codes

### College of Arts & Sciences

DEGREE	PROGRAM	CODE	EMPHASES OFFERED	TERMS	LOCATION	JOINT DEGREE OFFERINGS
MA	<b>Asia Pacific Studies</b>	<b>APS</b>		fall or spring	SF	MAPS/MBA
MS	<b>Biology</b>	<b>BIOL</b>	Behavioral Biology Cancer Biology Conservation Genetics Electron Microscopy Immunology Marine Biology (non-Mammals) Microbiology Molecular Biology Parasitology Photobiology Physiology (Ecological) Virology	fall or spring	SF	
PSM	<b>Biotechnology</b>	<b>BTEC</b>		fall or spring	SF	
MS	<b>Chemistry</b>	<b>CHEM</b>	Analytical Biochemistry Inorganic Organic Physical	fall or spring	SF	
MS	<b>Computer Science</b>	<b>CS</b> <b>CS</b> <b>CSBR</b>	Entrepreneurship (CSE) Bridge Program	fall or spring fall or spring fall or spring	SF SF SF	
MA	<b>Economics</b>	<b>ECON</b>		fall	SF	
MS	<b>Environmental Management</b>	<b>MSEM</b>		fall	SF	MSEM/MBA
MA	<b>International and Development Economics</b>	<b>IDEC</b>		fall	SF	
MA	<b>International Studies</b>	<b>MAIS</b>		fall	SF	
MOPA	<b>Public Affairs</b>	<b>PA</b>		fall	SF	
MA	<b>Sport Management</b>	<b>SM</b>		spring or summer summer	SF LA	
<i>Note: If you select both campuses, the Admissions Committee will choose, on a space-available basis, which campus you will attend.</i>						
MS	<b>Web Science</b>	<b>MSWS</b>		fall or spring	SF	
MFA	<b>Writing</b>	<b>WRIT</b>		summer	SF	

Return completed application and all application items to:

**University of San Francisco**  
**College of Arts and Sciences**  
**Office of Graduate Programs**  
**2130 Fulton Street, HR 240**  
**San Francisco, CA 94117**

For questions regarding the status of your application,  
 please contact the Office of Graduate Programs  
 in the College of Arts and Sciences at:

**(415) 422-5101 (phone)**  
**(415) 422-5134 (fax)**



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[www.usfca.edu/asgrad](http://www.usfca.edu/asgrad)

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