



College of Graduate Studies
Virginia State University

STUDENT PROGRAM & DATA CARD

Student Name (Last, First, MI) _____ Date of Admission _____

Current Address _____

Permanent Address _____

Area Code _____ Telephone _____ Student V Number _____

Undergraduate College / University _____

Undergraduate College / University Location (City, State) _____

Date of Undergraduate Degree _____ Undergraduate Degree _____ Major _____

Undergraduate Grade Point Average - Overall _____ Last Half of Work _____

Admission Type: Unconditional Conditional

Reason for Conditional Admission if not G.P.A.: _____

Language Requirement Met: Yes No N/A

Comments: _____

Graduate Record Examination:
Date of Test: _____ Verbal Quantitative Total

Date of Test: _____ Verbal Quantitative Total

Candidacy Application:
Approved Date _____ Deferred Date _____

Comprehensive / Thesis Examination
Approved _____ Deferred _____

Anticipated Date of Graduation: _____

Date of Graduation _____