



Master of Science in Urban Land Development California State University, Sacramento

6000 J Street

Sacramento, CA 95819-6081 (916) 278-6557, fax (916) 278-6544

Supplemental MS/ULD Program Application

Due December 1 for priority Admission (March 1 on a space available basis)

Applicant Information

Name (type or print) _____ SSN or Student ID _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____
Day Evening

■ Intended status full-time (more than 6 units) or part-time (6 units or less)

■ Intended year of entry (fall only) _____

■ How did you hear about the program? friend advertisement poster web search faculty member

other (explain) _____

Academic Preparation

Bachelor's Degree _____
Institution Major/Minor Date Completed

Current employment _____

Prerequisites (Use a separate piece of paper if necessary.)

applied calculus _____
Course Title Grade Institution Term Completed

intro. to statistics _____
Course Title Grade Institution Term Completed

Foundation Courses (list courses you want us to consider as satisfying foundation requirements)

Econ 204 (or Econ 1A/B) _____
Business Economics Course Title Grade Institution Term Completed

MBA 207 (or FIN 101) _____
Finance Course Title Grade Institution Term Completed

MBA 206 (or DS 101) _____
Managerial Statistics Course Title Grade Institution Term Completed

RELU 140 _____
Real Estate Development Course Title Grade Institution Term Completed

Letters of Recommendation

Please use the MS Urban Land Development recommendation form. A minimum of three letters are required from individuals with knowledge of your academic and professional potential. List them below.

1. _____

2. _____

3. _____

Test Scores: Graduate Management Admission Test (GMAT) **OR** Graduate Record Exam (GRE)

GMAT Test date _____ Total _____ / _____ %
Verbal _____ / _____ % Quantitative _____ / _____ % Analytical _____ / _____ %

GRE Test date _____ Total _____ / _____ %
Verbal _____ / _____ % Quantitative _____ / _____ % Analytical _____ / _____ %

Statement of Purpose

Please attach a one to two page statement of purpose. Your single spaced statement should address your purpose in pursuing the MS ULD. It also serves as a writing sample.

Application Procedures

Application Checklist:

- 1) **Submit to the Department of Public Policy and Administration**
 - Supplemental Program Application
 - Graduate Management Admission Test (GMAT) OR Graduate Record Exam (GRE) scores
 - Recommendation letter (3 minimum)
 - One to two page statement of purpose
 - Resume (recommended)
 - TOEFL scores (if applicable)
- 2) **Submit to the Sacramento State Office of Graduate Studies**
 - On-line CSU Graduate Application (www.csus.edu/gradstudies)
 - Two sets of Official Transcripts
 - Application fee

Notes to Applicant:

- Your undergraduate degree must be awarded **before** your first semester in the program.
- You must have earned a "B" or better in all prerequisite courses and a 3.0 in foundation courses. Additional coursework may be required if you have deficiencies in these areas.
- Recommendations may be from academic or professional sources.
- GMAT/GRE scores are good for five years. Applications will **not** be reviewed without them. LSAT scores may NOT be substituted for the GMAT/GRE.

Frequently Asked Questions

- Q: Can I transfer coursework completed at another institution?**
A: Subject to department approval, a maximum of 9 graduate units completed prior to admission to the MS ULD program may be applied this degree. Seven year currency restrictions apply.
- Q: Must I complete all prerequisites before being admitted to the program?**
A: You may apply for admission while completing prerequisites. However, be aware that your application will be more competitive if all prerequisites are completed and grades are available to the admissions committee.
- Q: Can I apply for admission to the program for the spring semester?**
A: No. Applications are only accepted for admission to the program for the fall.
- Q: Where do I get information about the GMAT or GRE?**
A: You can get information about the GMAT at <http://www.mba.com/mba/thegmat> or the GRE at <http://www.gre.org>.

How to Contact Us

MS Urban Land Development
California State University, Sacramento
6000 J Street
Sacramento, CA 95819-6081
916/278-6557
fax 916/278-6544
<http://www.csus.edu/uld/>

Graduate Center
California State University, Sacramento
6000 J Street
Sacramento, CA 95819-6112
916/278-6470
<http://www.csus.edu/gradstudies/>



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Recommendation Form

Notice to Applicant: Please fill in your name and carefully read the paragraph below. Then give this form to an individual with knowledge of your academic and professional potential.

Name of Applicant: _____

Confidentiality: The Family Education Rights and Privacy Act of 1974 (FERPA), as amended, permits enrolled students access to letters of recommendation retained in their files. The applicant may waive this right of access, in which instance retained letters will be considered confidential and will not typically be available to students. If you wish to waive your right of access to this letter, please indicate by signing on the line below. ***By signing below, you agree to waive all right to review the content of this letter of recommendation.***

 applicant signature

 date

Notice to Recommender: We are very grateful for your time and input. Your assessment of the applicant is crucial to our evaluation of his/her candidacy for admission.

As required by the Family Educational Rights Act of 1974, a student may either elect to waive or not to waive the privilege of viewing this recommendation form. If the student has not signed the above waiver, you should consider this form to be non-confidential.

Please complete the information below and attach a letter of recommendation (on office stationery, if available) to this form.

- Please check recommendation:**
- Truly Exceptional
 - Strongly Recommend
 - Recommend
 - Recommend with Reservations

Signature of Recommender _____

 date

Name (type or print) _____

Title _____

Organization _____

Address _____

 City

 State

 Zip

Phone _____ Email _____

Please return to student in a sealed envelope or mail directly to the department at the above address.



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_____ City State Zip

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