



# Graduate Studies Reentry Application

\_\_\_\_\_  
Name

\_\_\_\_\_  
Student ID

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

(\_\_\_\_) \_\_\_\_\_  
Home Phone

(\_\_\_\_) \_\_\_\_\_  
Daytime Phone (If Different)

\_\_\_\_\_  
Email

**1. Term of Last Attendance (must be within last 5 years)**  
Fall semester 20\_\_\_\_ Spring semester 20\_\_\_\_ Summer session 20\_\_\_\_

**2. Have you earned any credits at an institution other than UW-Superior since your last attendance at UWS?** \_\_\_\_\_  
If yes, list institutions and provide transcript.

**3. Requested term of reentry**     Fall     Spring     Summer

**4. ADMISSION TYPE:**  
 Graduate Degree Seeking     Graduate Special Student (no degree)     Certification Only (also check program)

**5. PLEASE CHECK APPROPRIATE PROGRAM BELOW:**  
**MASTER OF SCIENCE IN EDUCATION**

**Counseling**

- Clinical Mental Health
- Human Relations
- Marriage & Family Therapy
- School Counseling

**Educational Administration**

- Director of Instruction
- Director of Spec Ed/Pupil Services
- Principalship

**Special Education**

- Degree Only
- Cross Categorical

**Instruction**

**MASTER OF SCIENCE**

- Data Science
- Health and Wellness Management
- Sustainable Management

**SPECIALIST IN EDUCATION**

**Educational Administration**

- Superintendent

Submit to: Graduate Studies Office • Swenson 3065 • P.O. Box 2000 • Superior, WI 54880  
[gradstudy@uwsuper.edu](mailto:gradstudy@uwsuper.edu) • Phone: 715/394-8295 • Fax: 715/394-8371