Letter to the Dean

Graduate Center • Azusa Pacific University

AZUSA PACIFIC UNIVERSITY

A double-spaced, typed document is preferred. *Program code:* _____

Name _____ Social Security Number _____ - _____ - _____

Last First Middle

Define your short- and long-term education goals and indicate a time frame for completion of all intended studies at Azusa Pacific University. Please refer to appropriate Application Procedures for more clarification.

Send to:
Graduate Center
Azusa Pacific University
PO Box 7000
Azusa, CA 91702-7000