## Texas State University School of Health Administration "Graduating Seniors" Program Application

Qualified health administration majors completing their first semester of their senior year in the Bachelor of Healthcare Administration (BHA) program (during the last full semester on-campus prior to the administrative residency semester) who plan to pursue advanced studies in Health Administration have the opportunity to apply early and take HA 5300 online in the Master of Healthcare Administration (MHA) degree program during their final semester in the BHA program (while in their administrative residency semester). Applicable admission criteria to this program must be met.

Applicants will be evaluated by the BHA Program Director and MHA Admissions Committee to determine their suitability to enter the program (application form below must be completed correctly). BHA seniors who qualify and are approved must apply to the MHA through the Graduate College application process, to include meeting Graduate College application deadlines.

Graduate status is provisional until the BHA degree is awarded.

Instructions: interested students verify their own GPA eligibility and print/submit completed form (scanned) to <a href="mailto:healthadmin@txstate.edu">healthadmin@txstate.edu</a> NLT the semester deadline for the MHA Graduate Program application deadline.

Stude	ent Information
Full Name:	
TXST ID Number:	
TXST Email Address:	
Phone Number:	
Interested Program (Choose one):	
☐ Master of Healthcare Administration (In-person	)
☐ Executive Master of Healthcare Administration	(Online)
Eligibility	y Acknowledgement
☐ I acknowledge that participation in the Graduating Senion	ors Program requires:
<ul> <li>A 3.50 or greater GPA in all School of Health Adn</li> </ul>	ninistration (SOHA) courses (HA prefix).
<ul> <li>Approval and signatures from three SOHA faculty to date.</li> </ul>	members confirming my engagement and progress in the BHA program
Student Signature: Dat	re:
Facult	ty Endorsements
1. Faculty Name:	
Signature:	Date:
2. Faculty Name:	
Signature:	Date:
3. BHA Program Director: Dr. Jose Betancourt	
Signature:	Date:
SO	OHA Use Only
□ GPA verified ( $\geq$ 3.50 in HA courses)	
☐ Faculty endorsements verified	
☐ MHA course modality verified	
Application status: Approved / Denied	
Reviewed by: Dat	te: