

## **Application Process**

Master of Health Administration  
(for GSU Students)



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### **GSU Current Bachelor of Health Administration (BHA) Student Criteria:**

- Minimum GPA of 3.0

### **Application Requirements:**

- Complete graduate application ([applynow.govst.edu](http://applynow.govst.edu)) (fee waiver code: GSU\_GRAD)
- Submit 3 letters of recommendation, a current resume, a personal essay stating why you wish to pursue an MHA to Room G-176, and possibly participate in a telephone interview

### **GSU Current non Bachelor of Health Administration (BHA) Student Criteria:**

- Minimum GPA of 3.0

### **Application Requirements:**

- Complete graduate application ([applynow.govst.edu](http://applynow.govst.edu)) (fee waiver code: GSU\_GRAD)
- Submit 3 letters of recommendation, a current resume, a personal essay stating why you wish to pursue an MHA to Room G-176, and possibly participate in a telephone interview
- Complete 5 prerequisite courses upon admission if not previously completed in course work

HLAD 4106	Management Accounting for Health Care Organizations
HLAD 3104	Health Care Statistics
HLAD 3101	Principles of Health Care Management
HLAD 3108	Policy & Politics in Health Care
HLAD 3102	Principles of Health Care Microeconomics

### **GSU Alumni Criteria:**

- GSU undergraduate degree must have been received within 5 Years of the intended start of the MHA program.
- Overall GPA of 3.0 in the last 60 hours at GSU

### **Application Requirements:**

- Complete graduate application ([applynow.govst.edu](http://applynow.govst.edu)) (fee waiver code: GSU\_GRAD)
- Submit 3 letters of recommendation, a current resume, a personal essay stating why you wish to pursue an MHA to Room G-176, and possibly participate in a telephone interview
- Complete 5 prerequisite courses upon admission if not previously completed in course work

HLAD 4106	Management Accounting for Health Care Organizations
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For more information, please contact Dr. DeLawnia Comer-HaGans in the Department of Health Administration at [dcomer-hagans@govst.edu](mailto:dcomer-hagans@govst.edu) or 708.534.4047.

### **MHA Form**

<b>Student Name:</b>	
<b>GSU ID#:</b>	
<b>Anticipated MHA Start Date</b> (Year & Semester – Fa, Sp, Su):	
<b>GSU Undergraduate Degree Program:</b>	
<b>GSU Graduation Date</b> (projected or actual):	
<b>Preferred email address:</b>	
<b>Preferred Phone #:</b>	
<b>Advisor</b> (completed by dept.):	

### ***To Be Completed by Health Administration Office***

#### **Submitted Documents**

- 3 recommendation letters
- current resume
- personal essay

**Please submit this form and the above mentioned documents to Dr. Comer-HaGans [dcomer-hagans@govst.edu](mailto:dcomer-hagans@govst.edu).**

Received By: \_\_\_\_\_ Date: \_\_\_\_\_