



GRADUATE ADMISSION APPLICATION FOR
MASTER'S DEGREES IN EDUCATION

PLEASE PRINT OR TYPE

NAME: Last (Maiden Name) First M.I. Social Security Number

STREET: DATE OF BIRTH:

CITY: STATE: ZIP: HOME COUNTY:

HOME TELEPHONE: () WORK TELEPHONE: ()

ALTERNATE/MOBILE TELEPHONE: () EMAIL:

CITIZENSHIP: U.S. Citizen Immigrant-Permanent Resident (see below)
Non-Resident Alien Country of citizenship?
Visa Status?

a. Seeking Admission Full-time Part-time b. Starting Term Fall Spring Summer Year
c. Program
Curriculum & Instruction Instructional Design & Technology Science Education
Counseling Education School Administration & Supervision
Educational Information & Library Studies Special Education (select one) Elementary Secondary

EMPLOYMENT: Current Employer:

Does your employer offer tuition reimbursement? Yes No Don't Know

Employer Address:

EDUCATIONAL HISTORY (Please include all schools attended):

Table with 3 columns: Name, Location, Dates Attended/Graduation. Header: SECONDARY SCHOOL:

Table with 3 columns: College/University, Location, Major/Program of Study/Degree Earned/Dates Attended. Header: COLLEGE OR UNIVERSITY:

Table with 3 columns: College/University, Location, Major/Program of Study/Degree Earned/Dates Attended. Header: PREVIOUS GRADUATE STUDY:

Do you propose to transfer any graduate coursework toward your program at Saint Vincent College? Yes No

If yes, what course? _____

TEACHER CERTIFICATION:

Do you currently hold a teaching certificate? Yes No

State: _____ Type of Certificate _____ Areas _____

If no, do you wish to earn teacher certification? Yes No Area _____

Those who are not native speakers of English must submit recent TOEFL scores.

REFERENCES: Provide the names of three persons who will be providing recommendations.

1) _____ 2) _____

3) _____

PERSONAL STATEMENT:

On a separate sheet of paper describe briefly your reasons for wishing to enter the graduate program in education at Saint Vincent College.

RACE/ETHNICITY: The information requested below is sought to comply with the U.S. Department of Education reporting procedures. It is *strictly voluntary* and will not affect consideration of your application.

a. Are you Hispanic/Latino? Yes No

b. Please indicate predominant category/categories (you may check more than one).

American Indian/Alaskan Native

Native Hawaiian or Other Pacific Islander

Asian

White

Black or African American

VETERAN STATUS:

Are you a military veteran? Yes No

APPLICATION CHECKLIST: Enclose or request each of the following items. Items should be sent to the Graduate Coordinator at the Address below.

Application Form Transcripts from **all** Colleges Attended

Personal Statement (3) Letters of Recommendation (to be sent directly to Saint Vincent College)

How did you learn about our program? _____

I certify that the information given on this application is complete and accurate.

Signature

Date

Send to: Office of Graduate & Continuing Education
Saint Vincent College
300 Fraser Purchase Road
Latrobe, PA 15650-2690