



THE GRADUATE SCHOOL

www.salemstate.edu/graduate

352 Lafayette Street, Salem, MA 01970-5353

978.542.6323

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Certificate of Advanced Professional Study in Counseling and Psychological Services (9-27 credits) Application for Admission

For Office Use ONLY - Student ID#

SUBMIT THIS APPLICATION FORM TO THE GRADUATE SCHOOL WITH THE FOLLOWING:

- A \$35.00 non-refundable application fee made out to Salem State College – check or money order.
- Complete, official transcripts from all undergraduate institutions attended.
- Official transcripts of any graduate courses taken and degrees held.
- Applicants must submit three **Reference for Graduate Admission** forms (attached to application packet or available in the Graduate School or at www.salemstate.edu/graduate), including:
 - Educational references from an instructor, administrator, etc.
 - Professional references from a current supervisor, coworker, etc.

References may attach a letter, but must also return the provided form.

- Official copy of scores from either the Graduate Record Examination (GRE) or the Miller Analogies Test (MAT), taken within the last five years.
- All students for whom English is not a first language must submit scores from the Test of English as a Foreign Language (TOEFL).
- A 500- to 1,000-word, double-spaced statement of purpose addressing the following questions:

What factors in your personal and professional history have influenced you in the past and now lead you to seek admission to this program at Salem State College?

What are your long-term professional goals, and how will this program help you to meet them?

Is there any other information that you think would help the admissions committee evaluate your application?

Please check ONE proposed area of study:

Counseling and Psychological Services

Mental Health Counseling

Marriage and Family Therapy

Social Security Number: _____ Date: _____

Full Name: _____
Last Name First Name Middle Initial

Local Address: _____
No./Street City/Town State/Province Postal Code

Home Telephone: _____ Email Address: _____

Business Telephone: _____ Place of Employment: _____

Male: Female: Maiden Name or Other Name, if any: _____

Date of Birth: _____ Country of Birth: _____ Country of Citizenship: _____

Country and Address of Permanent Residency: _____

Are you a: U.S. Citizen Permanent U.S. Resident Other Non Immigrant

Resident Number: _____ F-1 F-2 J-1 J-2 Other

Check below the category that most closely describes your ethnic/racial recognition in the community (optional)

- | | |
|--|---|
| <input type="checkbox"/> American Indian or Alaskan native | <input type="checkbox"/> Pacific Islander (Micronesian or Polynesian) |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White, not of Hispanic origin |
| <input type="checkbox"/> Black, not Hispanic origin | <input type="checkbox"/> Hispanic |

When do you plan to begin graduate study: _____

Number of graduate credits already earned at Salem State College, if any: _____

Previous Study:

Name of Institution	Location	Dates of Attendance	Degree/Diploma	Year Received
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Grade Point Average (undergraduate studies): _____ Grade Point Average (graduate studies): _____

Honors or other special recognition of high scholarship/professional excellence: _____

Work Experience: (In addition to this brief list, you may attach a resume, if desired):

Name of Employer	Position	Employed	From:	To:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Date you have taken or will take (circle one) the Graduate Record Examination or Miller Analogies Test: _____

- Exempt, already hold a master's degree
 GRE scores: Verbal _____ Quantitative _____ Analytical _____
 MAT score: _____

Is English your first language: Yes No Primary language used in the home: _____

Languages other than English in which you are fluent: _____

Applicants for whom English is a second language: Date you have taken or will take the TOEFL: _____

TOEFL score: _____

For international students only: I have completed a Certificate of Finance form: Yes No

Applicant's Signature _____ Date _____