



# THE GRADUATE SCHOOL

[www.salemstate.edu/graduate](http://www.salemstate.edu/graduate)

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## Master of Science (MS) 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 or 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](http://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. Those who already hold a master’s degree are exempt from this regulation.
- 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:**

<input type="checkbox"/> MS Counseling and Psychological Services	<input type="checkbox"/> MS Mathematics
<input type="checkbox"/> Mental Health Counseling	<input type="checkbox"/> MS Geo Information Science
<input type="checkbox"/> Industrial/Organizational Counseling	<input type="checkbox"/> MS Criminal Justice
<input type="checkbox"/> Marriage and Family Therapy	<input type="checkbox"/> MS Industrial/Organizational Psychology
<input type="checkbox"/> Rehabilitation Counseling	
<input type="checkbox"/> MS Counseling and Psychological Services with Advanced Standing	
- Application Deadline: Rolling Admission

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 \_\_\_\_\_