



**MASTER OF SCIENCE DEGREE PROGRAM IN PSYCHOLOGICAL SERVICES
APPLICATION FOR ADMISSION**

Procedure for Application

For an application to be considered, all of the following applications materials must be sent to:

The School of Graduate Studies
East Central University
1100 E. 14th Street, Box M-6
Ada, Oklahoma 74820-6999

COMPLETED APPLICATION PACKET MUST INCLUDE THE FOLLOWING:
(Please place a check mark by items enclosed with application.)

1. Master of Science in Psychological Services Departmental Application.
2. One official transcript from all colleges and universities attended.
3. Submit scores for the GRE test, if required. (These scores must be sent directly from the Education Testing Service, Princeton, N.J. to the Dean of Graduate Studies.)
4. Two letters of recommendation.
5. Responses to the following questions. Attach a separate page for each question. Answers should be no longer than one double spaced typed page in length.
 - a. Describe your most challenging or difficult work or classroom experience and how you handled the situation.
 - b. Describe the most meaningful or rewarding experience in your life and how it impacted you.
 - c. Explain why you wish to earn the Master Degree in Psychological Services.
6. An applicant who does not meet the criteria for unconditional acceptance on the basis of the above documentation may consult the Masters of Science Degree in Psychological Services information in ECU Graduate Catalog pertaining to Conditional and Probationary Admittance.
7. Initial evaluation of applicants for the Fall semester will begin on April 15, for the Spring semester on September 15 and for the Summer semester on February 15. Late applications will be considered for any openings which may later become available for the indicated semester. **You will be notified by mail by the graduate office of your admission status. Completed applications must be received 6 weeks prior to the start of the semester of admission for consideration.**

NAME: _____ ID# or SSN#: _____
Last First MI

ADDRESS: _____
City/State/Zip Code

TELEPHONE: _____
Home Cell E-mail address

Indicate semester for which you are applying: Fall _____ Spring _____ Summer _____

Indicate which degree track you are pursuing: _____ Track A-Community/Clinical
_____ Track B-School _____ Currently Undecided

<u>Colleges Attended</u> (Starting with last college attended)	<u>Dates Attended</u> From To	<u>Major</u>	<u>Degrees Received</u> (If any)

Academic and Professional Honors Received:

References:
Minimum of two required (See front page #4)

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Position</u>

Work Experience
(Last five years starting with present position.)

<u>Employer</u>	<u>Dates Employed</u> From To	<u>Highest Position Held</u>

Are you presently working in a psychological services occupation? Yes _____ No _____
If the answer is yes, please answer the following:

Give a brief description of your current duties:

Date of Application Signature of Applicant