MURRAY STATE UNIVERSITY COUNSELING PROGRAM
Department of Educational Studies, Leadership and Counseling
3201 Alexander Hall
Murray, KY 42071
(270) 809-2793 - Office

DEADLINE: All application paperwork MUST be submitted by March 15th for Fall Semester Admittance and October 15th for the Spring Semester Admittance.

Application for Admission Directions:

- Your responses should either be handwritten (please print) or typed on this form.
- In order to complete this form, extra pages may be added if entries do not fit in the space provided.
- Information provided by you on this form, the MSU Graduate School Application for Admission and supporting documents will be considered when reviewing your completed application package.
- Other application requirements:
  - An application to the MSU Graduate School http://www.murraystate.edu/admissions.htm
  - A recent (<5 yrs) Graduate Record Examination (GRE) score.
  - A letter of intent (attached to this form).
  - Three letters of recommendation from people who can address the applicant's potential as a counseling professional.
  - A current resume.
  - An interview with the Counseling Program Admissions Committee.

Note: Admission to the program does not guarantee graduation. The following nonacademic conditions may result in dismissal if they are observed to impair the student's ability to work in class, practicum, or internship settings: (1) personal concerns, (2) interpersonal relationship problems, (3) personal attitudes or values that conflict with effective counseling relationships, and (4) unethical behavior.

Personal Data:

Name: _____ Date: _____
(last) (first) (MI)

Mailing Address: _____
(street) (city, state, zip code)

Contact Phone #: _____
(home) (cell) (work)

E-mail address: _____

Proposed Counseling Emphasis:

My planned emphasis is: _____ M.A. School Counseling _____ Ed.S. Clinical Mental Health Counseling

_____ Ed.S. School Counseling* _____ Other: _____

* Applicant must already hold a Master's Degree in School Counseling or its equivalent as determined by program faculty to be admitted to the Ed.S. in School Counseling or other requested counseling training/coursework. This is a non-licensure track. If you seek licensure please apply to the Ed.S. in Clinical Mental Health Counseling.

Academic Background:

College or University Attended	City & State	Years Attended	Major	Minor	Degree Earned	GPA

Graduate Record Exam (GRE) scores*: Date: _____ Location: _____

Verbal _____ Quantitative _____ Analytical or Writing _____

***Official scores must be sent to the Graduate School**

Record of Work Experience Related to Counseling:

Institution	Location	Position	Dates

Record of Work Experience – Non-Counseling:

Institution	Location	Position	Dates

Letters of Recommendation:

You are required to request three (3) professional letters of recommendation.

Name and Address Relationship

_____

_____

_____

Have you received any special recognition as a successful employee, volunteer, or college student?
____ Yes ____ No If yes, please describe below.

As an employee, volunteer, or college student, have you served as a leader?
____ Yes ____ No If yes, please describe below.

Please indicate Professional Activities.

Please indicate Professional Membership and/or Leadership Experience.

Please indicate the setting in which you would like to practice counseling after earning your degree.

Please indicate what graduate courses you have taken, or are currently taking in the Department of Educational Studies, Leadership and Counseling.

Course Number	**Course Name**	**No. of Credit Hours**	**Date Completed**

The MSU Counseling Program requires students to complete three semesters of field experience as part of their professional training. The field experience includes a 150-hour Practicum and two 300-hour Internships. In a brief paragraph, please describe how you plan to obtain the required clinical internship hours. (For example, if you are a full-time teacher, what is your plan to complete the hours? Also, please summarize the conversation you had with your school principal indicating the administrative support you will receive.)

Prospective Applicants are required to attach a Letter of Intent that is approximately one (1) page or a little more in length. The letter should provide a brief outline of the reason for applying to this particular program, objectives for pursuing this degree, and strengths and weaknesses of the applicant.

For the purpose of data collection in regard to the counseling program, please answer the following questions.

If admitted into the MSU Counseling Program, . . .

. . . at which site would you complete most of your program coursework?

____ Murray campus ____ Madisonville campus

. . . would you complete the program mostly as a ____ full-time student or ____ part-time student?

I certify that all information in this application is true and correct.

_____ _____

Your Signature Date

Return this completed application to:

Counseling Program Coordinator
Department of Educational Studies, Leadership and Counseling
3201 Alexander Hall
Murray State University
Murray, KY 42071