



**Master of Science in Counseling
Admissions Application**

- MS/School Counseling/PPS Credential (72 quarter units minimum)
- MS/College Student Affairs (72 quarter units minimum)
- PPS Credential only (for those who already hold a Master's Degree in Counseling)

Please check the quarter you are applying for: ___ Fall quarter ___ Winter quarter ___ Spring quarter

Name _____ Phone/home () _____
 Street _____ Phone/other () _____
 City _____ State _____ Zip _____
 E-mail _____

Present Employer _____
 Address _____ City _____ State _____ Zip _____
 Type of Work _____ Length of Employment _____

CSUB Identification Number (if known) _____ Date of Birth _____
 Baccalaureate Degree from _____
 Month/Year _____ Major _____ Minor _____
 Date of last attendance at CSUB _____ Undergraduate GPA _____

Note: If you have been inactive longer than 3 quarters, you need to be readmitted to CSUB; see the Admissions Office.

Master's Degree from _____
 Month/Year _____ Major _____ Minor _____ GPA _____
 Course taken to meet Statistic prerequisite _____ Date _____

1. Below list the names, positions, and contact information for three individuals who know your academic and professional abilities well (examples include: employers, former associates, college instructors, persons in the helping professions, etc.). These individuals may be contacted, if necessary, for recommendations for you. **In addition, please ask one individual listed below to complete the recommendation form found at the end of this application. Submit the form (in a sealed envelop with the recommender's signature across the seal) with your application.**

1. _____

2. _____

3. _____

II. In the spaces below, describe your college, volunteer, and/or employment history. Begin with the most recent.

Dates	College or Employer	Academic Advisor or Name of Supervisor	Course of Study or Type of Work	Reason For Leaving

- III. **Include with this application** a typewritten personal statement (2-4 pages). This statement should provide insight into you as a person and as a prospective professional counselor. Include the reasons you want to become a counselor and the reasons, academically and personally, why you should be chosen for admission into this Program.
- IV. **Include with this application** copies of college transcripts (unofficial copies are acceptable; be sure to send official transcripts to Admissions and Records with your application to the University). School Counseling applicants must also include a copy of CBEST scores (or current California teaching credential for those who hold one).
- V. Education Code Section 44320(b) requires that prior to admission to Internship, a candidate for a *Pupil Personnel Services Credential* shall obtain a Certificate of Clearance (see Credentials Analyst, EDUC 104). Present holders of teaching, specialist, or services credentials are exempted from this regulation, but must include a copy of the credential with the admission packet. In some cases, prior arrest record or other misconduct jeopardized the issuance of a Credential. See the CSUB Credentials Analyst if you feel you may have difficulty in this regard (EDUC 104).

I HEREBY SUBMIT MY APPLICATION FOR ADMISSION TO THE COUNSELING PROGRAM at California State University, Bakersfield, with the above information concerning my background, qualifications, and plans for completion of the program. I certify that, to the best of my knowledge, all information contained in this application and on any supplemental material filed with the application is true and accurate, and I authorize the appropriate committee to inquire or seek any additional information it should require.

Signature: _____ Date: _____

Educational Counseling Program
School of Education, California State University, Bakersfield
Recommendation Form

To be filled out by the applicant before this form is given to the recommender: I hereby waive any right to examine this recommendation form. I realize that the CSUB Educational Counseling Program will utilize this recommendation only in conjunction with consideration of my admission to the program and in evaluating my continued progress in regard to the characteristics listed below. I realize that waiving my right to access this form is not a condition of my admission. Please initial your choice: _____ I agree to the above waiver _____ I do not agree to the above waiver

Signature of Applicant

Date

Name of Applicant: _____

CSUB ID: _____
(if known)

To the Recommender:

This applicant has applied for admission to the California State University, Bakersfield Educational Counseling Program (with concentrations in School Counseling and College Student Affairs). Please give your opinion of the suitability of this applicant for the program according to the following characteristics: (*Circle appropriate description*).

1. Ability to perform graduate level study
Very Promising Good Average Fair Doubtful
2. Potential for leadership in educational counseling.
Very Promising Good Average Fair Doubtful
3. Potential to apply problem solving and critical thinking strategies.
Very Promising Good Average Fair Doubtful
4. Potential for maintaining effective relationships with colleagues, students, and community members.
Very Promising Good Average Fair Doubtful
5. Possession of personality and character traits in keeping with the standards of the profession.
Very Promising Good Average Fair Doubtful
6. Your overall rating of potential as a candidate for placement in a school counseling or college student affairs capacity.
Very Promising Good Average Fair Doubtful

How long have you known the applicant and in what capacity: _____

Comments: _____

Name and Position: _____

Address/Phone: _____

Signature: _____ Date: _____

Please place this completed form in an envelope, seal it, sign your name across the seal, and return it to the applicant. Thank you.