

**APPLICATION FOR ADMISSION TO DEGREE PROGRAM
MASTER OF ARTS IN HISTORY
CALIFORNIA STATE UNIVERSITY BAKERSFIELD**

INSTRUCTIONS: Applicants to the M.A. degree program in History must complete this form, as well as an application to the California State University Bakersfield (available from the Office of Admissions and Records, the Office of Graduate Studies and Research, the History Department, or online at www.csub.edu). The Department admits only those applicants who are also admissible to post-baccalaureate status at CSUB.

I. Name: _____ Social Security (or CSUB Student) Number: _____

Mailing Address: _____
Street Address/PO Box State ZIP

Phone Numbers: home _____ work or cell _____

Email address: _____

College or university conferring BA degree: _____

Major: _____ Minor (where applicable): _____

Year Received _____ GPA in last 90 quarter/60 semester units _____ GPA in Major _____

Term/Year: Planning to Begin M.A. _____ Planning to Finish M.A. _____

Considering: Thesis _____ or Exams _____ (check one)
Field(s) _____

II. APPLICATION REQUIREMENTS

Your completed application must include this cover sheet, as well as the following:

1. **A letter of intent.** This should be about 200-400 words long and explain your interest in graduate work in general and in our program in particular; it should also lay out what preparation qualifies you for study for an advanced degree.
2. **A writing sample** (preferably an upper-division undergraduate research paper, or similar writing that demonstrates your writing, research, and analytical skills).
3. **Undergraduate transcripts** (for your last 90 quarter units or 60 semester units).
4. **Two letters of recommendation** (from academic instructors, where possible). These should be in sealed and signed envelopes. They should be sent directly to the graduate coordinator or included with your application.

Please name your references: _____ and _____

III. PLEASE SEND THIS APPLICATION AND OTHER MATERIALS TO:

History Graduate Coordinator
Department of History--CSUB
9001 Stockdale Hwy.
Bakersfield, CA 93311-1099

Signature of Applicant _____ Date _____

Dept. recommendation: _____ Date _____