



Application for Admission: Part 1 Background Information Form

Instructions

- 1. Carefully review procedures outlined on enclosed inventory listing form.
2. Complete sections A – I on the application form.
3. Using the application-filing envelope provided, send all required documents and inventory listing form to:
Office of Graduate Admission, Loyola College in Maryland, 4501 North Charles Street, Baltimore, Maryland 21210-2699.
On-line applications can be found at www.loyola.edu/graduate under "Admission and Enrollment"

Admission Decisions

Admissions decisions are made on a rolling basis. Application Dates: June 15 for Fall Term; November 1 for Spring Term; March 15 for Summer. Applications completed by priority dates will be guaranteed review for specified term. All others will be considered on a space-available basis, time permitting.

A. Personal Data

Legal Name \_\_\_\_\_
DR./MR./MRS./MS /OTHER LAST FIRST MI JR./III/ETC.

Prefer to be called \_\_\_\_\_ Former/Other Name(s) \_\_\_\_\_

Male Female

Social Security Number [ ][ ]-[ ][ ]-[ ][ ][ ][ ]

Permanent Home Address \_\_\_\_\_
NUMBER AND STREET
CITY AND COUNTY STATE (COUNTRY IF APPLICABLE) ZIP/POSTAL CODE

Telephone at home address \_\_\_\_\_ Preferred E-mail address \_\_\_\_\_
AREA CODE/NUMBER

If different from the above, mailing address for all admissions correspondence \_\_\_\_\_
NUMBER AND STREET
CITY AND COUNTY STATE (COUNTRY IF APPLICABLE) ZIP/POSTAL CODE

Mailing address to be used from \_\_\_\_\_ to \_\_\_\_\_ Telephone at mailing address \_\_\_\_\_
MONTH/DAY/YEAR MONTH/DAY/YEAR AREA CODE/NUMBER

Are you a permanent resident of the United States? Yes No

If "No," which U.S. visa do you currently hold or need for entry into the U.S.? F-1 Other SPECIFY

The following questions are optional. This information is requested so that Loyola may fulfill statistical reporting obligations.

Ethnic origin: African American Native American or Alaskan Native Asian American/Pacific Island
Hispanic American Caucasian Other

Religious Affiliation \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_
(MONTH/DAY/YEAR)

IF YOU WERE BORN OUTSIDE THE UNITED STATES, YOU ARE REQUIRED TO PROVIDE PROOF OF US CITIZENSHIP (COPIES OF A BIRTH CERTIFICATE OR US PASSPORT) OR A COPY OF YOUR RESIDENT ALIEN CARD. IF YOU REQUIRE AN F-1 VISA YOU ARE REQUIRED TO COMPLETE THE INTERNATIONAL STUDENT SUPPLEMENT FORM AS PART OF YOUR APPLICATION FOR ADMISSION.

**B. Program Start Date**

(Select one option from each category)

Term:  Fall  Spring  Summer Year: 20\_\_\_\_\_

Attendance Plans:  Full-time (9 credit minimum)  Part-time

Cohort Code:    (complete this question only if directed)

**C. Self-Reported Grade Point and Praxis Score Report**

GPA: Undergraduate \_\_\_\_\_

Graduate (if applicable) \_\_\_\_\_

Praxis: (Required only for initial certification programs)

Composite score on : test 5710 \_\_\_\_\_  
test 5720 \_\_\_\_\_  
test 5730 \_\_\_\_\_

**D. Previous Education**

List all colleges/universities you have attended. Forward official transcripts from each institution.

College/University/School	Location	Attendance Dates (mo/yr - mo/yr)	Major	Degree/Certificate	Completion Date (mo/yr)

**E. Employment**

Present Position \_\_\_\_\_

Name of Employer \_\_\_\_\_

Business Address \_\_\_\_\_

NUMBER AND STREET

CITY AND COUNTY

STATE (COUNTRY IF APPLICABLE)

ZIP/POSTAL CODE

Business Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Are you a certified teacher  Yes  No

In what state do you hold certification? \_\_\_\_\_ In what area are you certified? \_\_\_\_\_

Is this certification  provisional  standard  advanced?

**F. Student Classification**

Select a student classification:

First Time Loyola Graduate Applicant  Former Loyola Graduate Student Returning to New Program

Re-applicant to Same Program

**G. Personal Essay**

The following essay question is required for all Education applicants:

1. Please include with your application for admission a concise essay describing your academic and professional accomplishments (other than your degree) and your aspirations.

The following essay questions are also required for all School Counseling applicants:

2. Please describe your career goals and objectives and their relevance to Loyola's school counseling program.
3. Please describe how you have pursued personal and professional development and your willingness to engage in self-examination.

**H. Certification**

I affirm that the information I have provided on this application form and all other admission application materials are complete, accurate and true to the best of my knowledge. I have authorized each college or university I have attended to release academic and personal information as related to this admission application upon request by Loyola College in Maryland. I agree to submit other materials that are required for this admission application. I understand that furnishing false information on any part of this admission application may result in cancellation of admission or registration or both.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## Application for Admission: Part 2 Program Selection Form

Name \_\_\_\_\_

Social Security Number --

### I. Program Selection

(Select one option)

#### Educational Leadership

- Master of Education
- Master of Arts in Education (*thesis required*)
- Post-master's: Certificate of Advanced Study in School Management  
Select One Option:  General or  Principal Certification
- Post-master's: Certificate of Advanced Study in Education  
Select One Option:  General or  Principal Certification
- Principal Certification – 18 credit post-master's course cluster

#### Curriculum and Instruction

- Master of Arts in Education (*thesis required*)  
Select One Option:  General  Literacy  
 Educational Leadership  Educational Technology  
 Liberal Studies  Special Education
- Master of Education (*no thesis required*)  
Select One Option:  Math Cohort\*  Science Cohort\*  
*\*check with department for availability*
- Post-master's Certificate of Advanced Study in Education

#### Educational Technology

- Master of Education
- Master of Arts in Education (*thesis required*)

#### Kodály Music Education

- Master of Education
- Post-master's Certificate of Advanced Study in Education

#### Montessori Education

Applicants are required to complete a form customized for Graduate Programs in Montessori Education. Contact the Office of Graduate Admission for an application form and further instructions.

#### Literacy

- Master of Education – Reading Specialist
- Master of Education – Reading Teacher
- Post-master's Certificate of Advanced Study in Education  
Select One Option:  Reading Specialist  
 Reading Teacher

#### School Counseling

- Master of Education
- Master of Arts in Education (*thesis required*)
- Post-master's Certificate of Advanced Study in Education

#### Special Education

- Master of Education  
Select One Option:  Early Childhood (Birth-8 years)  
 Elementary/Middle (grades 1-6)  
 Secondary (grades 6-12)
- Post-master's Certificate of Advanced Study in Education  
Select One Option:  Early Childhood (Birth-8 years)  
 Elementary/Middle (grades 1-8)  
 Secondary (grades 6-12)

#### Teacher Education

- Master of Arts in Teaching  
Select One Option:  
 Biology (grades 7-12)  English (grades 7-12)  
 Chemistry (grades 7-12)  Mathematics (grades 7-12)  
 Earth Science (grades 7-12)  Physics (grades 7-12)  
 Elementary/Middle (grades 1-6)  Social Studies (grades 7-12)

#### Special Student – Non-degree

- Non-degree Course Option (bachelor's degree required)



## Application Procedures and Inventory Listing

Name \_\_\_\_\_

Social Security Number    -   -

### How To Use This Form

Applicants to Loyola's Graduate Programs in Education are required to use this and accompanying forms. Loyola provides an inventory listing, transcript request and recommendation form as well as an application-filing envelope to assist applicants in completing the application process with greater ease. **Please include this form when you submit your application.**

### Completing Your Application

A completed application is one that includes the following documents:

- Completed Application Form, including Program Selection Form and applicant's signature
- Non-refundable fee of \$50
- Official transcripts from each college or university attended  
Transcripts from studies not conducted in English must be submitted with a certified English translation.
- Essay responding to questions on application
- Praxis I composite score report required only for applicants who are not currently certified and who are seeking certification in regular Elementary/Secondary Education of any area of Special Education.
- Professional Reference — (1) required for School Counseling; (2) required for Reading; optional for all other programs
- WES Evaluation (required only for International applicants who have pursued college or university study outside the U.S.)  
Official transcripts must be submitted to World Educational Services ([www.wes.org](http://www.wes.org)) for program evaluation and equivalency of grades and credits.
- TOEFL Score Report (required only if English is not your native language)
- International student supplemental documents (required only if you need a student visa)

### Admission Decisions

Admissions decisions are made on a rolling basis. **Application Dates:** June 15 for Fall Term; November 1 for Spring Term; March 15 for Summer. Applications completed by priority dates will be guaranteed review for specified term. All others will be considered on a space-available basis with every effort made to process applications for desired starting term. Applications that are incomplete at the start of one term will be considered for the next term.

### Inventory Listing

You may submit items separately or use the envelope provided. Before sealing the envelope to send your application documents to Loyola College, make certain that all appropriate boxes have been checked on this form. Remember to include the inventory listing with the application packet you send to the **Office of Graduate Admission.**

- Application Form – make certain it includes your signature
- Program Selection Form
- Non-refundable \$50 application fee
- Transcripts in unopened envelopes – Number of institutions attended \_\_\_\_\_
- Essay responding to questions on the application form
- Praxis I composite score report required only for applicants who are not currently certified and who are seeking certification in regular Elementary/Secondary Education of any area of Special Education.
- Professional Reference — (1) required for School Counseling; (2) required for Reading; optional for all other programs
- WES Evaluation—**required only for college or university studies pursued outside the United States**
- TOEFL Score Report – **required only if English is not your native language** (send unofficial scores with application and official scores must be sent directly from testing agency. Loyola's institution code is 5370).
- International Student Supplemental Form – **required only if you need a student visa**

**Please send all required documents to:** Office of Graduate Admission, Loyola College in Maryland, 4501 North Charles Street, Baltimore, MD 21210-2699  
Telephone: 410-617-5020 or 800-221-9707; Fax: 410-617-2002. Please use the application-filing envelope provided. Indicate **Education** in the "Program Name" box.



**Recommendation Form: School Counseling**

**To the Applicant**

Complete the following items and forward this form to the individual who will provide your reference. To expedite the processing of your application, you may wish to include a pre-addressed, stamped envelope. **This form is required for all School Counseling applicants.**

Applicant's Name \_\_\_\_\_  
LAST FIRST MIDDLE

Mailing Address \_\_\_\_\_  
NUMBER AND STREET

\_\_\_\_\_  
CITY AND COUNTY STATE AND COUNTRY ZIP/POSTAL CODE

Social Security Number    -   -

I hereby release Loyola College in Maryland and its agents and employees from liability in connection with investigating and evaluating my application for admission. I further release from liability all parties providing information, in good faith, concerning my qualifications in connection with my application.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**To the Person Completing This Form**

The person named above is applying for admission to a Graduate Program in Education at Loyola College in Maryland. The Admission Committee finds candid evaluations helpful in choosing from among highly qualified candidates.

*Notice about confidentiality: Under Public Law 93-380, the Family Educational Rights and Privacy Act, candidates for admission do not have access to their records unless and until they enroll at Loyola College in Maryland. To ensure confidentiality of information within the spirit of the law, the college will use this form for the purpose of admission only. The professional reference and any other subjective supplementary statements sent on the applicant's behalf, will be destroyed before his/her matriculation at Loyola. Your comments are valuable. The appraisal of the applicant will greatly assist the Admissions Committee in reaching a decision in his/her best interest.*

Loyola College in Maryland uses a self-managed application process. This process requires applicants to gather all application material and submit them in a single packet. When you complete this recommendation form, please place the form and any attachments into an envelope and **sign your name across the sealed flap**. Please return the envelope to the applicant, who has been instructed to submit it unopened, along with all of his or her application materials.

Reference's Name \_\_\_\_\_  
(PLEASE PRINT) DR./MR./MRS./MS /OTHER

Title/Position \_\_\_\_\_

Company/Institution \_\_\_\_\_

Address \_\_\_\_\_  
NUMBER AND STREET

\_\_\_\_\_  
CITY AND COUNTY STATE AND COUNTRY ZIP/POSTAL CODE

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Background Information**

Professional Relationship with Applicant:

How long have you known this applicant? Dates: from \_\_\_\_\_ to \_\_\_\_\_ length of time \_\_\_\_\_

- Student under my supervision
- Teacher under my supervision
- Employee under my supervision
- Other \_\_\_\_\_

If applicant is a former employee, please state his/her reason for leaving: \_\_\_\_\_

**Evaluation**

Please comment on whatever you think is important about the applicant, including a description of professional, academic and/or personal characteristics.

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*Complete this section for applicants to School Counseling only*

**Ratings**

Professional School Counselor Qualification Characteristics

	Almost Always	Most of the Time	Sometimes	Rarely	No Basis
Meets others with ease					
Exhibits tact in difficult situations					
Shows strong evidence of leadership skills					
Demonstrates a sense of humor and flexibility in dealing with others					
Initiates new ideas or concepts in achieving a comprehensive program of professional services					
Is competent and could implement new developments					
Exhibits maturity in working with students, parents and others					
Is conscientious and dependable					
Demonstrates mature judgement and a high degree of professionalism					
Is well liked by others who seek this person's assistance willingly					
Organizes plans for implementing professional goals on both long range and a daily basis					
Shows evidence of a willingness to continue their professional growth					
Is trusted by others					
Demonstrates emotional maturity					
Communicates clearly and effectively both orally and in writing					

How would you evaluate this person as a prospective professional school counselor?

- A most desirable future professional school counselor
- A desirable future professional school counselor
- An acceptable future professional school counselor
- Not desired as a future professional school counselor

Signature \_\_\_\_\_ Date \_\_\_\_\_





Recommendation Form: Reading

To the Applicant

Complete the following items and forward this form to the individual who will provide your reference. To expedite the processing of your application, you may wish to include a pre-addressed, stamped envelope. This form is required for all Reading applicants.

Applicant's Name \_\_\_\_\_  
LAST FIRST MIDDLE

Mailing Address \_\_\_\_\_  
NUMBER AND STREET

CITY AND COUNTY STATE AND COUNTRY ZIP/POSTAL CODE

Social Security Number [ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ]

I hereby release Loyola College in Maryland and its agents and employees from liability in connection with investigating and evaluating my application for admission. I further release from liability all parties providing information, in good faith, concerning my qualifications in connection with my application.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

To the Person Completing This Form

The person named above is applying for admission to a Graduate Program in Education at Loyola College in Maryland. The Admission Committee finds candid evaluations helpful in choosing from among highly qualified candidates.

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Loyola College in Maryland uses a self-managed application process. This process requires applicants to gather all application material and submit them in a single packet. When you complete this recommendation form, please place the form and any attachments into an envelope and sign your name across the sealed flap. Please return the envelope to the applicant, who has been instructed to submit it unopened, along with all of his or her application materials.

Reference's Name \_\_\_\_\_  
(PLEASE PRINT) DR./MR./MRS./MS /OTHER

Title/Position \_\_\_\_\_

Company/Institution \_\_\_\_\_

Address \_\_\_\_\_  
NUMBER AND STREET

CITY AND COUNTY STATE AND COUNTRY ZIP/POSTAL CODE

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Background Information

Professional Relationship with Applicant:

How long have you known this applicant? Dates: from \_\_\_\_\_ to \_\_\_\_\_ length of time \_\_\_\_\_

- Student under my supervision
- Teacher under my supervision
- Employee under my supervision
- Other \_\_\_\_\_

If applicant is a former employee, please state his/her reason for leaving: \_\_\_\_\_

**Evaluation**

Please comment on the professional, academic and/or personal characteristics of the applicant. If additional space is needed, please attach a separate page.

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*Complete this section for applicants to Reading Specialist/Teacher only*

**Ratings**

Reading Specialist/Teacher Qualification Characteristics

	Almost Always	Most of the Time	Sometimes	Rarely	No Basis
Shows strong evidence of leadership skills					
Demonstrates a sense of humor and flexibility in dealing with others					
Is competent and could implement new approaches and curricula					
Exhibits maturity in working with students, parents and others					
Is conscientious and dependable					
Demonstrates mature judgement and a high degree of professionalism					
Organizes plans for implementing professional goals on both long range and a daily basis					
Shows evidence of a willingness to continue professional growth					
Communicates clearly and effectively both orally and in writing					

How would you evaluate this person as a prospective reading specialist/teacher?

- A most desirable future professional reading specialist/teacher?
- A desirable future professional reading specialist/teacher?
- An acceptable future professional reading specialist/teacher?
- Not desired as a future professional reading specialist/teacher?

Signature \_\_\_\_\_ Date \_\_\_\_\_