

APP  
LICA

College of  
St. JOSEPH  
RUTLAND, VERMONT

GRADUATE

## ENROLLMENT INFORMATION

Enrollment Year: \_\_\_\_\_ Entry Term:  Fall  Spring  Summer Enrollment Status:  Full-time  Part-time

Have you previously been enrolled at College of St. Joseph?  Yes  No

Were you referred to College of St. Joseph by an alum?  Yes  No Name: \_\_\_\_\_ Year of graduation: \_\_\_\_\_

How did you learn about the graduate programs at College of St. Joseph? \_\_\_\_\_

Do you intend to apply for financial aid?  Yes  No Date you have taken or plan to take PRAXIS I exam: \_\_\_\_\_

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip Code

Email: \_\_\_\_\_

Home Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Cell Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Place of Birth: \_\_\_\_\_  
City State Country

Gender:  Male  Female

Are you a citizen of the United States:  Yes  No If no, are you a permanent resident holding a Green Card:  Yes  No

Country of citizenship if other than the United States: \_\_\_\_\_

Is English your first language?  Yes  No If no, what is your first language? \_\_\_\_\_

Ethnic Background (optional):  Hispanic or Latino  Black or African American  American Indian or Alaska Native

Native Hawaiian or Pacific Islander  Asian  White  Other

## EMPLOYMENT INFORMATION

Employment Status:  Full-time  Part-time  Currently Unemployed

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip Code

Email: \_\_\_\_\_

Work Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

## COLLEGIATE BACKGROUND

Please list all colleges or universities that you have attended starting with the most recent.

*You must request all transcripts from these institutions be sent to the College of St. Joseph Admissions Office.*

Name of Institution	City	State	Dates of Attendance	Graduation Date	Degree
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please list all graduate-level coursework you have completed.

*The number of graduate transfer credits accepted is determined by the program to which you are applying. Contact the department for details.*

Course Name	Institution	Grade	Credit Hours	Date Course Taken
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Describe any academic distinctions or honors that you have received: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been suspended, expelled or dismissed from any institution?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

## ACADEMIC AREA OF STUDY

Master of Business Administration:

Business Administration

Master of Education:

- Elementary Education\*
- General Education\*
- Reading\*
- Secondary Education in English\*
- Secondary Education in Social Studies\*
- Special Education\*

Post-Baccalaureate Education Endorsement:

- Elementary Education\*\*
- English\*\*
- Reading\*\*
- Social Studies\*\*
- Special Education\*\*

Master of Science:

- Alcohol and Substance Abuse Counseling
- Clinical Mental Health Counseling
- Clinical Psychology
- Community Counseling
- School Counseling\*

Graduate Certificate:

- Alcohol and Substance Abuse Services
- School Counseling\*\*

I am seeking initial teacher licensure:  Yes  No

I am currently licensed to teach: \_\_\_\_\_ in \_\_\_\_\_  
Grade or Curriculum State

Copy of license included with application:  Yes  No

\* Leads to initial teacher licensure or endorsement.

\*\* Requires current teacher certification.



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# Instructions

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## How to apply to College of St. Joseph.

To begin the application process for admission to a graduate program at College of St. Joseph, fill out this application form and submit along with required supplemental materials. *Some requirements vary by program.*

If you have questions during your application process, contact the College of St. Joseph Admissions Office.

Phone: (802) 776-5205

Fax: (802) 776-5310

Email: admissions@csj.edu

**CSJ FAFSA Code: 003685**

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### GRADUATE APPLICATION CHECKLIST

- Complete a graduate application.
- Submit a typed essay, specific to the program of interest (500-1000 words).
- Submit a professional résumé or curriculum vitae.
- Submit two sealed letters of academic or professional recommendation.
- Submit all official college transcripts showing undergraduate and graduate work.
- Schedule an interview and transcript review with department chair or designee.
- Submit passing PRAXIS I scores.  
*(Required for all Master of Education programs and Master of Science in School Counseling)*
- Application processing fee of \$35.00. *(Make check payable to College of St. Joseph)*

### ADDITIONAL REQUIREMENTS FOR INTERNATIONAL STUDENTS

- TOEFL, ELS or IELTS scores.
  - One letter of recommendation from a teacher of English.
  - Financial verification.
  - Officially translated transcripts.
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RUTLAND, VERMONT

71 Clement Road, Rutland, VT 05701 | (802) 776-5205 | (877) 270-9998 | admissions@csj.edu

[www.csj.edu](http://www.csj.edu)