

Graduate Application

College of Arts and Sciences

Master's Programs in Psychology

M.A. in Clinical Practices

M.A. in General Experimental

M.S. in School Psychology

M.S. in Organizational Behavior



UNIVERSITY
OF HARTFORD



College of Arts and Sciences Master's Program in Psychology

Directions for Application to Graduate Study

The Center for Graduate and Adult Academic Services and the Admissions Committee of the Department of Psychology welcome your application for graduate study at the University of Hartford. In order to be considered for graduate study in the Department of Psychology, you must complete the items listed in the CHECKLIST below. The Admissions Committee will review applications in the order in which they are received.

- Complete the general and supplementary application forms and submit them with the nonrefundable application fee—\$45 for domestic applicants, \$60 for international applicants—payable to the University of Hartford, to the address printed on the application form.
- Write a letter of intent using the enclosed form, describing your professional and career goals and how you expect graduate study to help you accomplish them.
- Submit official transcripts from all accredited colleges or universities you attended. Our program requires applicants to have completed a bachelor's degree.
- Submit three recommendations from academic sources/supervisory personnel with whom you have worked, using the forms provided.
- Examination requirements.

Applicants to the Master's Programs in Clinical Practices in Psychology, General Experimental Psychology, and School Psychology must take the Graduate Record Examination (GRE); the General and the Subject Test in Psychology. Information regarding this test may be obtained

from the Center for Graduate and Adult Academic Services. Official scores may be obtained from the Educational Testing Service, Princeton, NJ 08541-6000, or www.gre.org. Applicants to the Master's Program in Organizational Behavior must take either the Graduate Record Examination (Verbal and Quantitative portions) or the Graduate Management Aptitude Test (GMAT). Information regarding those tests may be obtained from the Center for Graduate and Adult Academic Services.

The ETS code number for the GRE University of Hartford is 3436.

The GMAT code number for the University of Hartford is XBBNR25.

Complete your application form online at:
<http://admission.hartford.edu/graduate>
or complete the attached application form.



UNIVERSITY
OF HARTFORD

Return to:
Center for Graduate and Adult Academic Services
Computer and Administration Center
200 Bloomfield Avenue
West Hartford, CT 06117-1599
Telephone: (860) 768-4371 Fax: (860) 768-5160
E-mail: gettoknow@hartford.edu

Application for Graduate Admission Master's In Psychology

Fall Spring Summer Year _____ Full Time Part Time

PERSONAL DATA

(Please type or print)

- -

Student's Social Security Number

Legal name:

Last (Family)

First (Given)

Middle (Complete)

Other name credentials
may be under :

Permanent address:

Street

City

State

ZIP

Phone ()

Local address:

Street

City

State

ZIP

Phone ()

Business address:

Employer

City

State

ZIP

Phone ()

Business address:

Street

City

State

ZIP

Phone ()

May we call you at work? Yes No

E-mail:

(*an e-mail MUST be supplied for application update and status)

Date of birth: Day _____ Month _____ Year _____

Sex: Male Female

Ethnic background
(optional):

Native American or Alaskan Native

African-American

Hispanic

Asian-American or Pacific Island

Caucasian

Other

Citizenship: Are you a U.S. citizen or a permanent resident (green-card holder)? Yes No

What is your country of birth? _____

If no, what is your country
of citizenship? _____

COLLEGE OF ARTS AND SCIENCES

College to which you are applying:

Master of Arts in Clinical Practices

Certification in School Psychology (for persons who have a master's degree)

Master of Arts in General Experimental

Master of Science in Organizational Behavior

Master of Science in School Psychology

How did you hear about the University of Hartford? _____

Have you previously applied to the University of Hartford? Yes No If yes, when? _____

Are you seeking graduate transfer waiver/credit? Yes No If yes, from which institution(s)? _____

To what other graduate programs have you applied to other than University of Hartford? _____

FEDERAL ASSISTANCE (Non-U.S. residents eligible only for graduate assistantships)

To receive federal assistance, including Stafford loans, students at the University are required to file the Free Application for Federal Student Aid (FAFSA) available at www.fasa.ed.gov. For additional information, please contact the office of Financial Aid at 860.768.4296 or email finaid@hartford.edu

ACADEMIC HISTORY

List all postsecondary institutions you have attended. (Attach additional information on separate sheet.)

Institution (List chronologically)	4-Digit Code (if known)	Location	Attended From-To	Degree Awarded	Year	Major/Minor	GPA

List the foreign languages in which you have a basic reading knowledge: _____

TESTING INFORMATION: Have you taken any of the following tests? M Yes M No

GRE DATE _____ PSYCH. GRE DATE _____ GMAT DATE _____

TOEFL* DATE _____ Have scores been forwarded to the University of Hartford? _____

*Note: International students are required to take the TOEFL (Test of English as a Foreign Language) prior to admission.

RECENT EMPLOYMENT HISTORY

(Attach additional information on separate sheet.)

Employer (List chronologically)	Location	Job Title	Dates

AWARDS, HONORS, PROFESSIONAL MEMBERSHIPS, AND LICENSES

(Attach additional information on separate sheet.)

RECOMMENDATIONS

List persons supplying your letters of recommendation. (See direction sheet for required number.)

Name	Title	Address

I certify that all items on this application are answered correctly and completely. I understand that incomplete information, the withholding of information, or incorrect information may disqualify me for admission to the University of Hartford or may later be the basis for my withdrawal or dismissal.

Applicant's signature _____ **Date** _____

Please return your application materials, with the nonrefundable application fee,* to the University of Hartford, Center for Graduate and Adult Academic Services, Computer and Administration Center, 200 Bloomfield Avenue, West Hartford, CT 06117-1599. Once your application and supporting documents have been processed, they become the property of the University of Hartford.

*\$45 Domestic Application, \$60 International Application. Hartt School students are required to pay an additional \$30 processing fee; check should be made payable to the **University of Hartford**.

— —
Student's Social Security Number



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College of Arts and Sciences Master's Program in Psychology

Letter of Intent

In the space below, describe your professional and career goals and how you expect graduate study to help accomplish them. If necessary, continue your letter on the back of the page.

Signature _____

Please return this form to the address above.

Student's Social Security Number



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College of Arts and Sciences Master's Program in Psychology

Application for Assistantship

To be filled in by applicant:

Name of applicant _____

I am primarily interested in:

_____teaching assistantship

_____research assistantship

In the space below, explain why you are applying for an assistantship and describe any special qualifications you might have.

PLEASE TYPE

If you are not awarded an assistantship, do you still wish to be considered for admission? Yes No

Signature _____

Please return this form to the address above.

Student's Social Security Number _____



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College of Arts and Sciences Master's Program in Psychology

Recommendation for Graduate Study

To be filled in by applicant:

Name of applicant _____

Proposed degree program _____ Proposed Major _____

Waiver (optional): I hereby waive my rights under the Family Educational Rights and Privacy Act of 1974 to inspect this letter of recommendation.

Signature _____ Date _____

To the person completing this recommendation:

We would appreciate your candid opinion of this applicant's preparation for graduate study. Please remember that the student has access to this recommendation unless he or she has signed the waiver-of-confidentiality statement.

Please indicate your evaluation by a check mark in each of the categories listed.

	Excellent	Good	Fair	Poor	N/A
Motivation	_____	_____	_____	_____	_____
Leadership	_____	_____	_____	_____	_____
Interpersonal skills	_____	_____	_____	_____	_____
Analytical skills	_____	_____	_____	_____	_____
Written communication	_____	_____	_____	_____	_____
Oral communication	_____	_____	_____	_____	_____
Time management	_____	_____	_____	_____	_____

To what reference group are you comparing this applicant? _____

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

(use reverse side, if necessary)

Please provide additional comments concerning the applicant's qualifications and potential for success in graduate school. You may use the reverse side of this form or attach a separate sheet.

Recommender's name _____

Date _____ Signature _____

Institution _____ Title/Position _____

Address _____
Street address City State ZIP

E-mail _____

Please return this form to the address above.

Student's Social Security Number _____



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Analytical skills	_____	_____	_____	_____	_____
Written communication	_____	_____	_____	_____	_____
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Analytical skills	_____	_____	_____	_____	_____
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Recommender's name _____

Date _____ Signature _____

Institution _____ Title/Position _____

Address _____
Street address City State ZIP

E-mail _____

Please return this form to the address above.



UNIVERSITY OF HARTFORD

College of Arts and Sciences **Master's Program in Psychology**

Master of Arts in Clinical Practices

Graduate Program Director: Dr. Tony Crespi
860.768.5081 crespi@hartford.edu EH203

Full - Time Only • Fall Start • Application Deadline: Feb 15

Master of Science in School Psychology

Graduate Program Director: Dr. Tony Crespi
860.768.5081 crespi@hartford.edu EH203

Full - Time Only • Fall Start • Application Deadline: Feb 15

Master of Arts in General Experimental

Graduate Program Director: Dr. Jack Powell
860.768.4720 jpowell@hartford.edu EH203

Part -Time or Full - Time • Fall, Spring, Summer Start
Application Deadline: Rolling Admission

Master of Arts in Organizational Behavior

Graduate Program Director: Dr. Jack Powell
860.768.4720 jpowell@hartford.edu EH203

Part -Time or Full - Time • Fall, Spring, Summer Start
Application Deadline: Rolling Admission



UNIVERSITY OF HARTFORD

**College of Arts
and Sciences**

**Hillyer
College**

**Hartford
Art School**

**Barney School
of Business**

**College of Engineering,
Technology and Architecture**

**College of Education, Nursing and
Health Professions**

**The Hart
School**

Statement of Nondiscriminatory Policies

Consistent with the requirements of Title IX of the Education Amendments of 1972, as amended, the University does not discriminate on the basis of gender in the conduct or operation of its educational programs or activities (including employment therein and admission thereto). The University admits students without regard to race, gender, physical ability, creed, color, age, sexual orientation, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the University. It complies with Title VI of the Civil Rights Act of 1964, as amended, and does not discriminate on the basis of race, gender, physical ability, creed, color, age, sexual orientation, national and ethnic origin in the administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other University-administered programs. The University of Hartford hereby provides notice to its students, employees, applicants, and others that it supports the language and intent of Section 504 of the Rehabilitation Act of 1973 (and regulations issued pursuant thereto), which prohibits discrimination on the basis of disability in its educational programs and activities, including admission to and access to the University. The Dean of Students (Gengras Student Union, telephone (860) 768-4260) is the individual designated to coordinate efforts by the University to comply with and carry out requirements under Title IX and Section 504.

Inquiries concerning the application of Title IX, Section 504, and Title VI may be referred to the Regional Director, Office of Civil Rights, U.S. Department of Education, Boston, Massachusetts 02109.