



California State University, Sacramento

**Department of Counselor Education**

# **Application Handbook for Fall 2012**

This handbook includes:

Complete instructions for applying to the Department of Counselor Education

**-Fall 2012 Deadline: Friday, December 2, 2011-**

**-No late applications will be accepted-**

- Please read **ALL** of the information in this handbook -

- See the listed dates for upcoming APPLICATION ORIENTATIONS -

- Application Instructions -

Applying to the Master of Science in Counselor Education is a **two step process**.

- **You must apply to the university** to become a graduate student here at CSUS through the Graduate Studies office: [http://www.csumentor.edu/admissionapp/grad\\_apply.asp](http://www.csumentor.edu/admissionapp/grad_apply.asp)
- **You must also apply to the Department of Counselor Education** by submitting the attached application to the department by the posted deadline: **Friday, December 2, 2011 at 4:00pm.**

***Please Note:** Graduate Studies and Counselor Education are two separate offices with separate procedures for applying for admittance. You must follow the procedures for each office according to the instructions. This application contains instructions for the Department of Counselor Education ONLY; you must go to the above link for the Office of Graduate Studies.*

- Dates & Deadlines -

<b>Application Orientations</b>	<b>Application Submission Clinics</b>
Wednesday, October 19, 2011 at 5:15pm Friday, October 21, 2011 at 5:15pm  Wednesday, November 16, 2011 at 5:15pm Friday, November 18, 2011 at 5:15pm	Tuesday, November 29, 2011 - 1:00pm - 6:00pm Wednesday, November 30, 2011 - 1:00pm - 6:00pm Thursday, December 1, 2011 - 1:00pm - 4:00pm <b>Friday, December 2, 2011 - 10:00am - 4:00pm</b>  Clinics will be held in the Department Office located in <b>EUREKA Hall Room 414</b>
<b>Informational Sessions on Applying to Counselor Education</b>  <b>Location is TBA</b>	See campus map at: <a href="http://www.csus.edu/campusmap/">http://www.csus.edu/campusmap/</a>

**The FINAL DEADLINE DATE IS: FRIDAY, DECEMBER 2, 2011 at 4:00pm**

**NO LATE APPLICATIONS OR ANY REQUIRED DOCUMENTS WILL BE ACCEPTED**

**NO EXCEPTIONS**

## **Department Admissions Information and Requirements:**

All applicants to the Department of Counselor Education must meet the University's admission requirements in order to then be admitted to our department into the Master of Science in Counseling Program. See above information for both applications.

Department Staff will do the initial processing and the faculty will complete the review process of the applications. This review process takes from 8-10 weeks at which time you will be notified via email of the next steps; interviews and /or any other requirements.

Admittance to the counseling program at CSUS is a competitive process. The number of applications received far exceeds the number of students that can be admitted in a given year. Decisions regarding admission are based on consideration of the applicant's potential for success as a professional counselor, academic performance, professional promise, interpersonal skills, maturity, motivation for personal and professional development, and congruence with the counseling department's philosophy.

Admission is determined by examining the following: (1) academic record and grade point average (GPA), (2) quality of written portions of the application, (3) quality of letters of recommendation, (4) relevant work experience and an (5) Interview with program faculty advisors. All applicants are rank ordered based on the above criteria, and the top candidates are offered admission to the Department of Counselor Education.

Rejected Applications. The Department Office Staff and Department Faculty cannot answer questions concerning the reasons why a particular application was rejected. All admissions decisions are final.

Co-requisite Coursework. Upon admittance as a **probationary** student in the Counselor Education program, students will be required to take the following undergraduate *co-requisite* courses under probationary status during their first semester in the program:

- Abnormal Psychology or EDC 172: Abnormal Psychology can be completed at Sac State, or another accredited institution including a community college. The following equivalent names will be accepted: abnormal psychology, abnormal behavior, and deviant behavior.
- EDC 170: Introduction to Counseling. Required to be completed at Sacramento State.
- EDC 171: Power, Privilege and Self Identity in Counseling. Required to be completed at Sacramento State. (**Minimum 3.4 average GPA in EDC 170 and EDC 171 combined is required**).
- EDC 172: Child & family Psychopathology. Please note **SCHOOL specialization** students are **required** to complete EDC 172 at Sac State.

**Failure to take the above courses or meet the above-stated grade requirements during the probationary period is grounds for automatic dismissal from the M.S. in Counseling program.**

In order to apply to the program you do not need to have the above courses completed or be enrolled in them. You may still apply if you haven't taken the above listed co-requisite courses. If you are admitted to the program, you will be considered **probationary** and **must complete all requirements including the above listed co-requisites by the end of your first semester** in Counselor Education; proof of completion must be provided to the department office BEFORE registration for your second semester begins.

Applicants who successfully pass all elements of the Departmental screening and co-requisite requirements will be *classified* students in the Department of Counselor Education. Only those applicants who show professionalism, promise of success and fitness will be admitted and only those who continue to demonstrate a satisfactory level of professionalism, scholastic competence and fitness shall be eligible to proceed in the program.

Students become *fully classified* into the Department of Counselor Education only if they have completed all steps discussed in this packet.

Once students are fully admitted in the program they **MUST** read a copy of the *Department of Counselor Education Student Handbook*. ALL students are responsible for knowing and following the requirements to proceed in the Counselor Education program. All needed information is located in the above mentioned handbook.

### **Structure of our program:**

**This is a cohort program;** if admitted to this program, students will matriculate in (6) pre-determined semesters (3 years as a full-time student) or in (12) pre-determined semesters (6 years as a part-time student).

Students are expected to evaluate their own circumstances and commitment to this program which is constructed of both day and night classes. It is the students' responsibility to be available during scheduled class times, practicum and field study hours.

If you have any questions about the information in this handbook regarding applying and/or acceptance to the Master of Science in Counselor Education, you may contact the department office @ 916-278-5399; however, you are required to **FIRST** read the published information on our website: <http://edweb.csus.edu/edc/index.html> and in this handbook to gain general knowledge about our program.

### **Submitting your application:**

Once you have completed the process of applying to Graduate Studies you will need to submit the application for Counselor Education (attached). We do not charge application fees.

Please Note: we require **EVERYTHING** listed on the **CHECKLIST** (see below).

We strongly encourage all applicants to attend both an *Application Orientation* and an *Application Submission Clinic*. Dates and times are listed in these Application Instructions.

**Department of Counselor Education**

**APPLICANT CHECKLIST**

**Fall 2012**

\_\_\_\_\_ Complete University application online and mail all required documents by their published deadline.

\_\_\_\_\_ Review the Department of Counselor Education's application instructions and other materials.

Complete the Department Application along with all of the listed requirements. See below:

\_\_\_\_\_ **Typed application forms**

\_\_\_\_\_ **Personal statement; signed and dated (double spaced; 12pt. font) No more than two pages.**

\_\_\_\_\_ **Typed responses to the (two) questions; signed and dated (double spaced; 12pt. font)**

**No more than one page per question.**

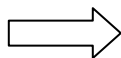
\_\_\_\_\_ **Resume**

\_\_\_\_\_ **Three letters of recommendation (on letterhead with original signatures) (letters do not need to be sealed) There is a "letter of recommendation" form in this application that should be given to your evaluators.**

\_\_\_\_\_ **Official transcripts (last 60 units or 90 quarter units) completed or in progress) (We will not review any application without official transcripts in the packet).**

**TIPS:**

If you have NOT YET APPLIED TO THE UNIVERSITY



Fill out the University Graduate Application on-line.

[http://www.csus.edu/gradstudies/appinfo\\_guidelines.htm](http://www.csus.edu/gradstudies/appinfo_guidelines.htm)

- Use the checklist provided to be sure that your application packet is complete.
- Letters of recommendation should be sent directly to you at least two weeks prior to the deadline. Letters do not have to be sealed but they must have an original signature.
- If you have any questions regarding our application process, contact Counselor Education @ (916) 278-5399.
- Order your official transcripts as soon as you decide to apply ~ we will not accept application packets without official transcripts. **YOU MUST SUPPLY THE DEPARTMENT OF COUNSELOR EDUCATION WITH OFFICIAL TRANSCRIPTS EVEN IF YOU HAVE SENT THEM TO THE OFFICE OF GRADUATE STUDIES;** we also require a set.
- Contact those who you are going to request letters' of recommendation from BEFORE the deadline gets close; be aware that you may not be the only person asking for a letter of recommendation.

## **Instructions for completing the application:**

**On Page 1** of the application (front page) is the checklist for department staff to use when you turn in your application; *do not mark in that area.*

**On Page 2** you will provide personal data and choose a preferred area of specialization (you may select only **ONE**). Please provide a current **EMAIL** address, mailing address and contact phone numbers. If you anticipate moving during the application process, please provide us with your change of address immediately. Call (916) 278-5399 with any contact information changes during and after the application process. **Most of our communication with you will be via email so please provide a current email that you check often.**

**On Page 3** complete the section regarding completion of undergraduate preparation by providing either information on the Co-requisites (if applicable). Also provide information about the California Basic Educational Skills Test (CBEST) and information about your **official transcripts**.

Information on the CBEST needs to be supplied only by students seeking one of the **School Counseling Credentials**. Although successful completion of this test is **not required for admission** into Counselor Education Credential programs, applicants are required to provide evidence that they are registered to take the exam **prior to their second semester in the program**. Successful completion of the CBEST is required of all credential candidates **prior to completing the credential program**. Students admitted without the CBEST are expected to present a photocopy of test scores to the Department of Counselor Education office when the test is successfully completed. Written material about the CBEST is available in Eureka hall, room 209, or you may call the University Testing office at 916-278-6296. (**Note:** Applicants with criminal records may not be able to obtain a Credential for public school service in California).

Information about **official transcripts** is required of all students. If you have completed a University Application for Admission and forwarded official transcripts to the Graduate Center, you **MUST** still provide official transcripts to our office.

**On pages 4 and 5** complete all sections that apply to you. Please note that we distinguish between paid and unpaid work experiences, as well as training received both within and outside of academic programs. **DO NOT COMPLETE BY STATING, “SEE RESUME.”** Your application will not be considered complete and therefore, will be deemed unacceptable. **You MUST fill out the ENTIRE application and submit a current resume.**

**On Page 6** list the names of the three individuals from whom we will be receiving **letters of recommendation** and locate the **two questions** for which you must provide a typed response; Please limit your typewritten response to no more than one full page per question (double spaced 12 pt. font). You must also provide a **personal statement** that should be no more than 2 pages typed (double spaced 12 pt. font). Your personal statement will be evaluated based on your demonstrated interest and background in counseling. Both your personal statement and responses to the questions should also be **signed and dated at the bottom**.

The final page of the application is the form to attach to **each** of your three letters of recommendation.

# DEPARTMENT of COUNSELOR EDUCATION

## APPLICATION FOR ADMISSION

### Fall 2012

## Deadline – Friday, December 2, 2011 @ 4:00pm

This application must be typed; we will not accept hand written applications.

*Do not mark in this section – For department Staff Use Only*

\_\_\_\_\_ Application Forms (Typed)

\_\_\_\_\_ Personal Statement (no more than two pages, typed, double spaced, signed & dated)

\_\_\_\_\_ Response to the (two) questions (one page per question; typed, doubled spaced, signed & dated)

\_\_\_\_\_ Resume

\_\_\_\_\_ 3 Letters of Recommendation w/forms

\_\_\_\_\_ Official Transcripts

Application Packet accepted by: \_\_\_\_\_ date: \_\_\_\_\_

<b>Last Name:</b>		<b>For Office Use Only</b>
<b>First Name:</b>		
Address:	CSUS ID# (if already assigned)	
City:	Day Phone:	
State:  ZIP:	Evening/Message Phone:	
Other surnames that may appear on your records:	<b>Email Address:</b>	

<p>Put a check by the (one) specialization for which you would like to apply.</p> <p><b>Specializations within the Master of Science in Counseling:</b></p> <p><input type="checkbox"/> Career Counseling</p> <p><input type="checkbox"/> Marriage and Family Therapy (MFT)</p> <p><input type="checkbox"/> School Counseling – includes Pupil Personnel Services (PPS Credential Preparation)</p>	<p>Have you applied yet to Sacramento State?</p> <p><input type="checkbox"/> yes    <input type="checkbox"/> no</p> <p>If yes, when:</p>
	<b>For Office Use Only</b>
	<p>G.A.R. received: _____</p> <p>(from Grad Studies)</p> <p>Application for Classification: _____</p> <p>(from Student, if needed)</p>

Co-requisite Course If you have taken or are currently enrolled in Co-requisite courses please fill out this section.	Institution	Semester/ Year	For Office Use Only Documentation Approved	
Abnormal Psychology (PSYC 168 or equiv.)				
Introduction to Counseling (EDC 170)				
Power, Privilege, and Self-Identity (EDC 171)				
Child & Family Psychopathology (EDC 172)				

### Additional Credential Requirement

For students applying to CREDENTIAL programs (see important information in Application Procedures)

Check ONE:

CALIFORNIA BASIC EDUCATION SKILLS TEST (CBEST) successfully completed

Date (mm/dd/year):

I am currently registered to take the CBEST on the following date (mm/dd/year):

I will register to take the CBEST examination prior to the end of my 2<sup>nd</sup> semester in the program.

Have you also supplied the Department of Counselor Education office with a set of OFFICIAL transcripts for our faculty to review?       Yes       no\*

**Internships/Apprenticeships/Practical/Volunteer Experience**

Dates From/to	Institution/ Location	Description of Responsibilities	Tasks Performed
to			
to			
to			
to			

**Unrelated Paid Experience**

Dates From/to	Institution/ Location	Description of Responsibilities	Tasks Performed
to			
to			
to			
to			
to			
to			
to			

### Related Paid Experience

<b>Dates</b> <b>From/to</b>	<b>Institution/ Location</b>	<b>Description of Responsibilities</b>	<b>Tasks Performed</b>
to			
to			
to			
to			
to			
to			
to			

**Please list your (three) evaluators (forms & letters must be in this packet)**

Ref 1:

Ref 2:

Ref 3:

**Please respond to the following TWO questions. Limit your typewritten response to no more than one full page per question; double spaced in 12pt. font.**

### **Question #1**

As an undergraduate student (or graduate student in other programs), you were asked to write research or essay papers in which you selected the topics. Reflect on the topics of papers that you have written during your time as a student and summarize the following: What, if any, themes in the types of papers that you elected to write emerge? What factors can you identify that influenced the emergent themes or topics that you wrote on? How did those themes develop across time? If you were to add to that body of writing now, what would you want to write about?

### **Question #2**

Please describe your experience in working with, serving, or socially engaging with diverse persons or populations. Please summarize your assessment of the quality, quantity and nature of these experiences. Summarize your strengths and challenges in these relationships, as well as the strengths and challenges of diverse others in forging a relationship with you.

### **Personal Statement**

Please provide a personal statement. **Limit your typewritten response to no more than two full pages, double spaced in 12pt. font.**

The following page should be used as an information sheet for letters of recommendation and should be completed either by the applicant or the evaluator for each of the (3) people writing a letter of recommendation.

This form can be filled out by the Evaluator OR the Applicant, but all **letters** must be signed by the EVALUATOR. While the form can be emailed to your evaluator(s); letters of recommendation must be on letterhead (if applicable), must have an original signature and must be included in your application packet. We will not accept any letters by email.

Applicant Name:		
Area of Specialization Applying to:	Day Phone:	Evening Phone:

It is the applicant's responsibility to see that all letters of recommendation arrive by the deadline. Given the high number of applications the office receives each semester, we cannot contact students who are missing letters.

Please submit only letters written by individuals who know you in a professional capacity such as, instructors or employers. Letters from "friends or family" are not accepted.

**TO THE EVALUATOR:** The above-named applicant is seeking admission to a graduate level program that trains persons to assume responsible roles in the helping professions. Please provide what evidence you have regarding any or all of the following:

- (a) The applicant's ability to succeed at graduate level academics
- (b) The applicant's emotional stability and ability to attend to the needs of others
- (c) The applicant's dependability, responsibility, morality and ethics

Evaluator's Name:	Title:
Organization:	Phone(s):
Address: City State ZIP	Relationship to Applicant:  How long have you known this applicant?

Please attach your **signed** letter of recommendation to this form