

College of Education and Human Development Department of Counseling and Special Populations

SCHOOL COUNSELING

	tal information is required for application to the school counseling graduate program. pleted form via email to: cospadmissions@lamar.edu
PERSONAL INFORMAT	ION
Last Name:	
First Name:	
Lamar ID #:	
Undergraduate Degree:	
PROGRAM REQUIREM	ENTS
	versity's graduate admission requirements, the Department of Counseling and Special sadditional criteria for admission:
Select all that apply:	I currently possess a valid teaching certificate
	I will have two or more years of teaching experience by the completion of my school counseling degree
-	bove, you are certifying that these statements are true and verifiable.

LICENSURE ACKNOWLEDGEMENT

As certification/licensure requirements may change without notice, it is the responsibility of the student to confirm the requirements for certification and/or licensure in their home state. It is also the responsibility of the student to evaluate and understand state requirements related to online education and out-of-state educational programs. There may be additional practice/testing requirements.

Read and Respond: I understand that I must adhere to the certification/licensure requirements of my

home state

ADDITIONAL QUESTIONS

What personal characteristics do you possess that will enable you to form effective relationships that also attend to cultural differences? Please elaborate on your response and provide relevant examples.
Response Required:
What evidence can you provide that would indicate your preparation to be successful in a graduate level program? Please provide examples.
Response Required:

What are your career goals elaborate on your response		are they aligned with	this graduate-le	evel counseling p	orogram?	Please
Response Required:						
Are there any current or for or licensed as a counselor?		or ethical issues that	may prevent yo	ou from being ce	rtified and/	
Response:	No	Yes				
If Yes, please explain:						

Is there anything else you would want the Admissions Committee to know?
Optional:
Please submit your completed form via email to: cospadmissions@lamar.edu