EMORY & HENRY COLLEGE

GRADUATE APPLICATION
Five-Year & Fast Track Professional Studies
Master of Education Program

Office of Graduate Admissions P.O. Box 10 Emory, VA 24327-0010 www.ehc.edu 800-848-5493

APPLICATION PROCEDURE AT EMORY & HENRY COLLEGE

1. Complete the five-year Graduate Program Application and sign it. Send all forms to: Office of Graduate Admissions, PO Box 10, Emory & Henry College, Emory, VA 24327-0010 or fax to 276-944-6935.
2. All applicants are required to have official transcripts for all undergraduate and graduate work submitted to the Office of Admissions (Applicants should have a minimum overall GPA of 2.75 and 3.0 in the major.)
3. Applicants must submit two letters of reference from professors familiar with the applicant's academic performance and promise for graduate work.
4. Please submit a personal essay, typed or neatly handwritten, detailing any related classroom experience working with children that you have acquired (teaching Sunday school, summer camp). Be sure to include commentary on your values, relationships and plans as you describe your experiences. Your essay may be written in the space provided or attached on a separate sheet of paper with your name clearly indicated at the top.
5. Students are required to take and pass the Praxis I or meet the state approved alternative. Students should have official copies of this test and other tests sent to the Office of Graduate Admissions.

STUDENT SECTION: PERSONAL INFORMATION

❑ One Year Professional Studies (Fast Track) ❑ Five Year Professional Studies

Status: Have you previously applied for admission to E&H? ❑ Yes: list semester and year _____ ❑ No

Expected Date of Entrance: 20____ ❑ FALL (August) ❑ SPRING(January) ❑ SUMMER (May)

Social Security Number (Area Code) Home Phone (Area Code) Work Phone Email Address

Last Name First Name Middle Name (Jr./III/etc.) Preferred Name

Date of Birth (Month/Day/Year) Place of Birth (City/State) Current County of Residence

Mailing Address/Rural Route/PO Box City State Zip

Permanent Address (if different from above) City State Zip

I am a US Citizen: ❑ Yes ❑ No Permanent Resident: ❑ Yes ❑ No Alien Registration Number _____

OPTIONAL: WE DO NOT REQUIRE THE FOLLOWING INFORMATION. WE USE THIS DATA ONLY FOR AGGREGATE REPORTING PURPOSES, AND TO BETTER UNDERSTAND, SERVE AND HONOR OUR STUDENTS' CULTURAL HERITAGE.
What racial or ethnic group do you identify with? (African-American/Black, Native American, Asian, Asian-American, White/Caucasian, Biracial/Multiracial, Hispanic/Latino, Other—please specify): _____
Ethnicity: _____ Religious Affiliation: _____

Gender: ❑ Male ❑ Female

Current Employment: Are you currently employed? ❑ Yes ❑ No

Place of Employment _____ Job Title _____

ACADEMIC INFORMATION

Have you taken: **Praxis I** _____ **Praxis II** ❑ Yes ❑ No **VCLA** ❑ Yes ❑ No

Reading Math Writing

Major: _____ Minor: _____

Institutional GPA: _____ Major GPA: _____

REFERENCES (FROM WHOM WE WILL RECEIVE RECOMMENDATION LETTERS)

Name	Relationship	Contact Number	Email Address

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ESSAY

Detail any related classroom experience working with children that you have acquired (e.g. teaching Sunday School). Be sure to include commentary on your values, relationships and plans as you describe your experiences.

To the best of my knowledge, the information provided in this application is complete and accurate.
By my signature, I pledge that all work presented here is my own.

Signature _____ Date _____

Emory & Henry College does not discriminate on the basis of race, color, national origin, age, religion, sex, sexual orientation, or physical handicap in administration of its educational policies, hiring policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs. Emory & Henry College affirms the dignity and worth of every individual.

EMORY & HENRY COLLEGE

TRANSCRIPT REQUEST

Five-Year & Fast Track Professional Studies Master of Education Program

Office of Graduate Admissions P.O. Box 10 Emory, VA 24327-0010 www.ehc.edu 800-848-5493

TO THE APPLICANT: Complete the information below and send it to the Registrar of each university or college you have attended. If you are currently enrolled at Emory & Henry or have previously attended the College, you must request that your transcript be sent from the Registrar's Office to the Admissions Office.

PLEASE PRINT OR TYPE:

Social Security Number _____

Title Name: Last First Middle Maiden

Institution Dates of Attendance Degree Graduation Year

I authorize the release of my academic transcript to Emory & Henry College Office of Admissions:

Signature _____ Date _____

TO THE REGISTRAR: The person named above is applying for admission to graduate studies at Emory & Henry College. Please enclose this form and one copy of the applicant's transcript in an official university envelope. If the applicant's transcript cannot be forwarded, please indicate the reason*. Send the materials promptly to:

Office of Graduate Admissions
Emory & Henry College
Post Office Box 10
Emory, VA 24327

For further information, please call 276.944.6133.

**Reason cannot be sent:* _____

Signature of Registrar _____ Date _____

E&H

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RECOMMENDATION
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APPLICANT: Fill in the section below and give this form to the individuals you have chosen to recommend you for our graduate program. Ask each individual to complete this form and mail it to us. An additional letter of recommendation may also accompany this form. Please indicate whether you will waive your legal right of access to this form and any accompanying letter.

PLEASE PRINT OR TYPE. Social Security Number _____

Title Name: Last First Middle Maiden

Mailing Address

City State Zip Country

❑ *I do* ❑ *I do not waive the right of access to this form and any accompanying letter.*

Signature _____ Date _____

REFERENCE: You have been asked to supply a recommendation to our graduate program for the individual named above. Our admission committee will review your evaluation carefully as we make our decision. Your recommendation will be treated as confidential, unless the applicant has retained his/her right of access to it (see above).

1. Please rate the applicant using the following chart. Compare the applicant to other people you know who have successfully completed graduate work.

Area of Evaluation	Outstanding	Good	Average	Poor	Unable to rate
Enthusiasm					
Ability to work well with others					
Dependability					
Promptness and thoroughness					
Initiative					
Ability to do research					
Academic promise to do graduate work					
Communication Skills (written)					
Communication Skills (oral)					

2. How long have you known the applicant?_____In what capacity? _____

3. Please make any additional statements about the applicant that you feel are appropriate (attach a separate sheet if necessary).

Signature of reference _____ Date _____

Name of reference (please print) Position Institution/Business

Please mail to: Admissions Office, M.A. in Education Program, Emory & Henry College, PO Box 10, Emory, VA 24327. 276.944.6133

REV. PR-6-14

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