Graduate Application

College of Arts and Sciences

Graduate Institute of Professional Psychology

Doctoral Program in Clinical Psychology
Directions for Application to Graduate Study

The Center for Graduate and Adult Academic Services and the Admissions Committee of the Graduate Institute of Professional Psychology welcome your application for graduate study at the University of Hartford. In order to be considered for graduate study in the Graduate Institute of Professional 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—$40 for domestic applicants, $55 for international applicants—payable to the University of Hartford.

☐ Write a letter of intent of one or two pages describing your professional and career goals and how you expect graduate study to help you accomplish them.

☐ Write a personal statement describing life experiences that helped shape your personality and your interest in professional psychology.

☐ Submit official transcripts from all accredited colleges and universities. Our program requires applicants to have completed a bachelor’s degree. Please compute your grade point averages for overall undergraduate study, for psychology, and, if applicable, the same grade point averages for any completed graduate work. On the supplementary form, please list all undergraduate and/or graduate psychology courses you have taken.

☐ Submit three recommendations from academic sources/supervisory personnel with whom you have worked, using the forms provided.

☐ Submit vita.

☐ All applicants must take the GRE General Test and the GRE Subject Exam in Psychology. Scores may not be older than five years. Information regarding Graduate Record Examination test dates may be obtained by contacting Educational Testing Service at www.ets.org. Send scores to the University of Hartford = Code 3436

☐ Admission to the program also requires a personal interview. After review of applicants’ completed application forms, roughly 96 candidates are invited to attend a four-hour process that involves both group and individual interviews. These interview sessions are held in late January and early February. Applicants are notified of the Admissions Committee decision on or about March 1.

All materials should be submitted to the Center for Graduate and Adult Academic Services, Computer and Administration Center, University of Hartford, 200 Bloomfield Avenue, West Hartford, CT 06117-1599; (860) 768-4371.

Deadline: December 15

Complete your application form online at:
http://admission.hartford.edu/graduate
or complete the attached application form.
Application for Graduate Admission
PsyD

□ Fall    □ Summer  Year __________  □ Full Time

PERSONAL DATA
(Please type or print)

Legal name: ___________________________  ___________________________  ___________________________
Last (Family)  First (Given)  Middle (Complete)

Other name credentials may be under: __________________________________________

Permanent address: ___________________________  ___________________________  ___________________________  ___________________________
Street  City  State  ZIP  Phone

Current address: ___________________________  ___________________________  ___________________________  ___________________________
Street  City  State  ZIP  Phone

Business address: Employer  ___________________________  ___________________________  ___________________________  ___________________________
Street  City  State  ZIP  Phone  Fax

May we call you at work? □ Yes □ No

E-mail: __________________________________________
(*an email must be supplied for application update and status)

Date of birth: Month ________ Day ________ Year ________ Sex: □ Male □ Female

Ethnic background (optional):
☐ Native American or Alaskan Native  ☐ African-American
☐ Asian-American or Pacific Islander  ☐ Caucasian
☐ Hispanic  ☐ Other __________________________________________

Citizenship: Are you a U.S. citizen or a permanent resident (green-card holder)? □ Yes □ No
If no, what is your country of citizenship? __________________________
What is your country of birth? __________________________

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). Please contact the office of Financial Aid at 860.768.4177.

If applying for full-time study, do you wish to be considered for a graduate assistantship? □ Yes □ No
ACADEMIC HISTORY
List all postsecondary institutions you have attended. (Attach additional information on separate sheet.)

<table>
<thead>
<tr>
<th>Institution (List chronologically)</th>
<th>Location</th>
<th>Attended From-To</th>
<th>Degree Awarded</th>
<th>Year</th>
<th>Major/Minor</th>
<th>GPA</th>
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List the foreign languages in which you have a basic reading knowledge: ____________________________

TESTING INFORMATION: Have you taken any of the following tests? □ Yes □ No If yes, when? ______________

□ GMAT □ GRE □ PSYCH. GRE □ MAT □ MCAT Have scores been forwarded to the University of Hartford? ____________

□ DAT □ TOEFL*

*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.)

<table>
<thead>
<tr>
<th>Employer (List chronologically)</th>
<th>Location</th>
<th>Job Title</th>
<th>Dates</th>
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AWARDS, HONORS, PROFESSIONAL MEMBERSHIPS, AND LICENSES
(Attach additional information on separate sheet.)

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

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<th>Name</th>
<th>Title</th>
<th>Address</th>
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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.

* $40 Domestic Application, $55 International Application. Hartt School students are required to pay an additional $30 processing fee; check should be made payable to the University of Hartford.
Letter of Intent

Please write a 1-2 page statement describing your professional and career goals and how you expect graduate study to help accomplish them. If necessary, use additional paper.
Personal Statement

Please write a 2-3 page statement describing your life experiences, addressing the importance of an early developmental period that significantly helped to shape who you are today. Please include how these will inform your becoming a clinical psychologist. Use additional paper if necessary.
College of Arts and Sciences
Graduate Institute of Professional Psychology
Doctoral Program in Clinical Psychology

Supplementary Graduate Application

To be filled in by applicant:
Name of applicant ____________________________

List all of the undergraduate and graduate psychology courses you have taken. Continue on back of page, if necessary.

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GPA Undergraduate ___________ Psychology ___________ Graduate ___________

Please return this form to the address above.
College of Arts and Sciences
Graduate Institute of Professional Psychology
Doctoral Program in Clinical Psychology

Application for Assistantship

To be filled in by applicant:

Name of applicant ____________________________________________________________

I am interested in a research assistantship

☐ Yes   ☐ No

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

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

If you do not qualify for an assistantship, do you still want to be considered for admission? ☐ Yes   ☐ No

Please return this form to the address above.
Recommendation for Graduate Study

To be filled in by applicant:

Name of applicant ____________________________________________

Proposed degree program _______________________________________

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

Signature ________________________________ Date __________________

To the person completing this recommendation:

The University of Hartford offers a program of study and training leading to the Doctor of Psychology (Psy.D.) in Clinical Psychology. The program follows the Practitioner/Scholar training model. The goals of this program are to develop highly competent clinical psychologists who are compassionate and knowledgeable about current empirical and theoretical developments, and who are capable of designing, delivering, and critically evaluating clinical services.

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

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

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<tr>
<th>Category</th>
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How long have you known the applicant and in what capacity?

☐ It is likely that this candidate will attain a doctorate. ☐ Will not complete a program.

Please attach a narrative recommendation for this applicant.

Signature ________________________________ Agency ________________________________ Position ________________________________

E-mail ____________________________________________________________________________

Please return this form to the address above.
College of Arts and Sciences
Graduate Institute of Professional Psychology
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Recommendation for Graduate Study
To be filled in by applicant:

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Recommendation for Graduate Study

To be filled in by applicant:

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Please attach a narrative recommendation for this applicant.

Signature ___________________________ Agency ______________________________ Position ________________________

E-mail ______________________________

Please return this form to the address above.
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.