

# EISNER INSTITUTE FOR PROFESSIONAL STUDIES

## Application for Admissions

**QUARTER YEAR**    **2017**    (Please Select one from below)

- Spring: \_\_\_\_\_
- Summer: \_\_\_\_\_
- Fall: \_\_\_\_\_
- Winter: \_\_\_\_\_

### PROGRAMS:

**Master of Arts (M.A.) in Psychology:** (Please Select from below)

- **Marriage and Family Therapy (MFT)** \_\_\_\_\_
- **Master of Arts (M.A.) in Psychology: Licensed Clinical Professional Counselor (LPCC)** \_\_\_\_\_

**Doctor of Psychology Psy.D:** (Please specify area of interest below)

- **Areas(s) of Interest:** \_\_\_\_\_

### STUDENT INFORMATION

**Name:**                      Last \_\_\_\_\_                      First \_\_\_\_\_                      Middle \_\_\_\_\_

**Mailing Address:**      Street Address \_\_\_\_\_

City \_\_\_\_\_      State \_\_\_\_\_      Zip Code \_\_\_\_\_      Country \_\_\_\_\_

**Telephone:**      Home \_\_\_\_\_      Work \_\_\_\_\_      Cell \_\_\_\_\_

email: \_\_\_\_\_

**Employment:** (If any)    Name of Employer: \_\_\_\_\_    Job Title: \_\_\_\_\_

Licensures/Certifications: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_    Date of Birth: \_\_\_\_\_

### EDUCATIONAL HISTORY

College/s Attended:      Undergraduate: \_\_\_\_\_      Graduate: \_\_\_\_\_

1. Name of Institution \_\_\_\_\_      Dates attended      from \_\_\_\_\_      To \_\_\_\_\_

Major \_\_\_\_\_      Degree \_\_\_\_\_      GPA \_\_\_\_\_

2. Name of Institution \_\_\_\_\_      Dates attended      from \_\_\_\_\_      To \_\_\_\_\_

Major \_\_\_\_\_      Degree \_\_\_\_\_      GPA \_\_\_\_\_

3. Name of Institution \_\_\_\_\_      Dates attended      from \_\_\_\_\_      To \_\_\_\_\_

Major \_\_\_\_\_      Degree \_\_\_\_\_      GPA \_\_\_\_\_

Please add additional educational history on a separate page if any?

