Application for Admission to the B.A./M.A. Program in Psychology Psychology students may only enter in Junior year

Name	e:							
	(Last)			(First)		(Middle)		
Semes	ter of Entrance	□ Autumn	□ Spring 20					
Permai	nent Address: _	(Street and Nun						
		(Street and Nun	nber)	(City)	(State)	(Zip Code)		
Perma	nent Phone Nur	nber:(Countr						
		(Countr	y/area code)	and number				
Presen	t Address:	t and Number or V	Mos Boy)	(City)	(Stato)	(Zip Code)		
	,		,	,	, ,			
Presen	t Address Valid	Until:			Present Telep	phone:		
Wesley	an E-Mail Addr	ess:						
Date of	Birth:			Place of Bir	th:			
Citizen	ship: □ U.S	.A. Other _		Legal R	esidence	Type Visa		
Please	answer #1-8 or	n separate paper a	and submit w	ith this applicat	ion, including #9	by March 1 st .		
1)	If you have at	tanded more than	n one under	araduato collo	ro places attach	a statement giving the		
1)	reasons for yo		ii one under	graduate collet	ge, piease allacii	a statement giving the		
2)	•		nt to this ann	lication				
3)								
4)								
5)								
	If not, please comment.							
6)	Please describe in detail your academic background, abilities, interests, and objectives. What							
	attracted you to your chosen course of study and why do you feel that Wesleyan's program is suited							
	to your needs?							
7)	List name, title, address, phone number, and e-mail address of at least three individuals who know							
	your abilities a	nd from whom yo	u will request	letters of reco	mmendation.			
8)	Briefly describe the research you propose to conduct.							
9)	Copy of Academic History from Wesleyan University must be handed in (print from e-portfolio). Copy							
	of Undergradu	ate Transcript from	m other unive	ersities must als	so be handed in.			
l certif	y that the infor	mation on this a	pplication is	complete and	l accurate.			
	Annlicant's Sid	inature:			Date:			

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BA/MA PROGRAM IN THE SCIENCES APPROVED PROGRAM OF STUDY

Last Name:		First Name:	Name:M.I						
WESID#:	Dept.:	PSYCHOLOGY							
Class:	Advisor:								
COURSES TO BE USED TO COMPLETE THE M.A. DEGREE									
DEPT & CID		Course Title	Yr & Sem	Credit					
	ne M.A., as stated	ourses listed above fulfill I in the Combined BA/MA		n					
		plied to the MA from cour nents for inclusion listed							
Signature (student) & date	Signature (facul	ty adviser) & date						

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Students enrolled in this program will receive the B.A. degree after four years and the M.A. degree at the end of the fifth year. Departments may set their own requirements for admission into the program which will be administered by the Graduate Council. The Office of Graduate Student Services will maintain a roll of those enrolled in the program and will administer the academic records of students in the fifth year of the program.

Applications are due to Cathy Race on March 1st. A decision will be announced by early April.

Financial support other than tuition remission in the fifth year is not a formal component of this program.

A B.A./M.A. candidate is not enrolled in the program until this form has been completed, signed in approval by the department chair, major adviser and research adviser, and filed with the department.

Student: I understand that this is an official record of my academic program of study. ANY CHANGES IN THIS PROGRAM MUST BE APPROVED BY MY MAJOR/RESEARCH ADVISER AND A NEW FORM MUST BE SUBMITTED TO THE GRADUATE OFFICE.
Student's Signature and Date
Program:
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Note: Application, Program of Study and Letters of Recommendation are filed with the Department.

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