

DEPARTMENT OF REHABILITATION AND DISABILITY STUDIES
APPLICATION FOR ADMISSION
MASTER'S DEGREE IN CLINICAL REHABILITATION COUNSELING

Southern University
230 Blanks Hall Baton Rouge, LA 70813

Phone: 225-771-2390
225-771-2667
Fax: 225-771-2293

Dear Prospective Graduate Student:

Enclosed are the materials required for applying for admission to the graduate program in Rehabilitation Counseling. Please be sure to fully complete the applications and send to the appropriate offices. You may use this as a checklist to ensure that all necessary documents have been submitted.

Please send the following to:
The Graduate School Southern University
Baton Rouge, Louisiana 70813

1. **Application to the Graduate School**
2. **Official Transcript(s)**
-to be sent from the Registrar's Office(s) of institute(s) of higher education attended
3. **Test of English as Foreign Language(TOEFL)Score for Foreign Students**
-to be sent directly from the Educational Testing Service

Please send the following to:
Madan M. Kundu, Ph.D., FNRC, CRC, NCC, LRC Chair and Professor
Department of Rehabilitation and Disability Studies 230 Blanks Hall
Southern University
Baton Rouge, Louisiana
70813 E-mail:
kundusubr@aol.com

4. **A copy of the application to the Graduate School**
5. **Official Transcript(s)**
6. **Three Letters of Recommendation on official letterheads and signed**
-at least two should be completed by professors familiar with your academic performance

The students are admitted only in the Fall Semester. Deadline for the submission of completed application is April 15.

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1. Please print or type:

Name: _____ Social Security No. _____
Last First Middle

Present Address:

Street Number City State Zip

Phone: Home Work Cell Email

Permanent Address:

(Mailing address) Street and Number City State Zip

Date and Place of Birth: _____
Date City State

U.S. Citizen: Yes () No () Visa Status: _____

Louisiana Resident: Yes () No () Date of Application: _____

Optional: Gender: _____ Race: _____ Disability: _____

2. Academic History: (include all colleges attended) List most recent first
College Attended Location Date Major Date Received/Expected

3. Please list the relevant courses you have taken in Rehabilitation, Psychology, Sociology, or closely related areas at the undergraduate (U) or graduate (G) level(s).

Course no. and Title	Institution	Undergraduate (U) Graduate (G)	Credit Hours	Grade

(Attach additional sheet if necessary)

Present Cumulative Grade Point Average: ____ 4 point scale point scale: _____

4. OCCUPATIONAL EXPERIENCE: (professional, vocational, military, teaching, field work)

Please list the recent one first:

Position Title and Description	Agency	Location	Dates

5. REFERENCE: Please list the names of three professors familiar with your academic/ professional work who will provide Letters of Recommendation.

Name and Title	Address, Phone Number, E-mail Address

Signature of Applicant

Date

Please respond to the following questions and limit your comments to the spaces provided.

6. How did you become interested in the area of rehabilitation and what are your career goals? (No less than 150 typed written words)

7. In what ways do you feel your undergraduate or work experience has prepared you for career in rehabilitation counseling? (No less than 150 typed written words)

10. FINANCIAL STATUS

Check the appropriate:

I will be

- self-supported
 supported by spouse
 supported by parents
 other

I expect to receive support from (list source and approximate amount)

(Source)

(Amount)

During your first academic year, how much do you expect to receive in total support from other sources? _____

Indicate Sources: _____

Number of dependents (excluding self): _____

How would you rate your ability to attend graduate school **WITHOUT** financial assistance?

- would be able to attend
 might be able to attend unsure
 would probably not be able to attend
 would not be able to attend

I certify that the above information is correct to the best of my knowledge.

Signature

Date

For information on Financial Aid contact:

Financial Aid, P.O. Box 9961, Southern University, Baton Rouge, Louisiana 70813 Phone: 225-771-2790

Fax: 225-771-5898

For information on Graduate Assistantship contact:

Dean, Graduate School, P.O. Box 9860, Southern University, Baton Rouge, Louisiana 70813 Phone: 225-771-5390

Toll Free: 888-223-1460; Fax: 225-771-5723