<b>The University of Texas at Tyler</b> <b>Department of Psychology and Counseling</b> <b>Clinical Psychology</b> (Department Information Sheet is Required for Graduate Student Applications)				
Requesting Admission for:	Fall	Spring	Summer	20
MASTER OF SCIENCE IN CI			n applying for (p	please check only one):
Name: (Last) (First	) (Middle)	Student I	.D. Number:	
Address:		Telephone: Primary		
			Secondary	
		E-mail:		
Bachelor's Degree Information:				
Granting Institution:			Date:	
			GPA:	
Major				
Do you have a master's degree?		•		
GRE Scores:	Verbal	Quanti	itative	Total
If you have not taken, when are y	ou scheduled?			
Please indicate the Psychology co Intro to Psychology	urses (or equivalen Statistics	• •		etter: Research Methods
Test & Measurements	Physiological Psy	chology Learning & Conditioning		

**STATEMENT OF PURPOSE:** Describe your future educational and career goals and explain how the Clinical Psychology program at UT Tyler would fit into these goals. How does the program correspond to your particular plans, needs, and previous background and experiences? (Not to exceed two pages.)

\* If you have up to 9 hours of graduate counseling-related coursework you would like to have reviewed for possible transfer credit, please complete and attach the graduate transfer credit approval form. http://www.uttyler.edu/graduate/forms/Grad\_Transfer\_Credit\_Form.pdf

## CHECKLIST FOR COMPLETED APPLICATION TO DEPARTMENT:

**Department Information Sheet** (this form)

\_\_\_\_\_ Statement of Purpose

**3** Letters of Recommendation or 3 Evaluation of Academic Potential Forms http://www.uttyler.edu/psychology/files/applicantratingsheet.docx) Submit department application packet by e-mail to PsycCounAdmissions@uttyler.edu or by mail to:

Department of Psychology and Counseling Clinical Psychology Program The University of Texas at Tyler 3900 University Blvd Tyler, Texas 75799