Application for Admission
Clinical Psychology Area of Focus

I. **Identifying Information:**

Name: __________________________________________________________

Address: ___________________________________________________________________

Phone: _____________________  Email: ____________________________

II. **Academic Information:**

Full-time _____  Part-time _____  Number of earned credits: _______

If you are not currently a Towson University student, list which school you are attending:
_________________________________________________________________

Grade Point Average: Overall _____  Psychology GPA _______

Have you completed the prerequisite courses?  Yes _____     No _____

If not, what is your plan for the completion of prerequisites prior to beginning the program in the Spring?
_________________________________________________________________

_________________________________________________________________

Please list all psychology courses you have taken on a separate piece of paper. Include the name of the course, the institution, the semester, the name of the professor, and your final grade.

III. **Essays:**

On separate paper, please answer the following questions in clear and complete typewritten sentences.

1. What attracts you to clinical work in the field of psychology?

2. What are your primary clinical interests and why?

3. In your opinion, what personality characteristics do you have that would
contribute to your competence as a mental health worker?

4. Have you had any prior experience working with people in a mental health or other settings with diverse people?

5. What else can you tell us about you that would support your application to the clinical area of focus?

IV. **Writing Sample:**

Include with your application a sample of your written work for a class that you believe enhances your application. The sample need not come from a psychology class, although a psychology paper is preferred. Return of the work cannot be guaranteed, so we recommend submitting a copy of the original paper.

V. **Letters of Recommendation:**

Please submit at least one letter of recommendation from a professor(s) familiar with your academic skills and character. Usually letters of recommendation are submitted in sealed envelopes with the professor’s signature across the sealed back flap of the envelope. Students typically do not see the letter. If you do not know a professor well enough to obtain a letter of recommendation, you may ask an employer for a recommendation.

**Return this application to the Psyc Office (LA 2210) no later than October 17th to:**

Dr. Bethany Brand, Professor
Director, Clinical Area of Focus
Department of Psychology
Towson University
8000 York Rd.
Towson, MD 21252