Application Forms

On the following pages are the forms for
- Application for admission to a degree program
- Application for a graduate assistantship
- Recommendations

All application materials should be addressed to
Division of Graduate Studies
Ithaca College 111 Towers Concourse
Ithaca, NY 14850-7142

You can obtain information regarding extramural study from the Division of Continuing Education and Summer Sessions located in the Towers Concourse.

Recommendations
To apply for admission to a degree program you must obtain two recommendations evaluating your academic ability and/or performance. Recommendations should be secured from persons who are able to comment on your academic capabilities. The recommendations must be sent directly to the Division of Graduate Studies no later than June 1 for the fall semester or summer session of that calendar year and December 1 for the following spring semester. If you are applying for an assistantship you must also submit two recommendations evaluating your work performance — this is in addition to those evaluating your academic work. No recommendations are necessary to enroll in nondegree study. Letters of recommendation may also be submitted in an official placement package sent directly to the Division of Graduate Studies by a college or university placement office.

Transcripts
Have your official transcripts sent directly from your undergraduate institution to the Division of Graduate Studies. Upon completion of the bachelor's degree, an official transcript with degree posted and dated is required for matriculation status.

Acknowledgment and Notification
Ithaca College will send you a written acknowledgment of your application. The letter will inform you of anything that may be missing from the file.
Each program makes its own admissions decisions on its own schedule. You will be notified of your admission status throughout the process.

Application Checklist
The checklist below will help you through the application process. If you omit any of these steps or complete it improperly, the processing of your application may be delayed.

- **Application**: Have you enclosed the completed application for admission? Is it signed and dated? If you are applying for an assistantship, have you enclosed the application?
- **Payment**: Have you enclosed a check or money order in the amount of $30 United States currency for the application fee, payable to Ithaca College? Your application will not be processed unless this fee is enclosed.
- **Transcript**: Have you arranged to have your official transcript, degree posted and dated, sent directly to Ithaca College from the registrar's office of your degree-granting institution?
- **Recommendations**: Have you arranged to have two letters of recommendation sent to Ithaca College by persons evaluating your academic ability? Also, if you are applying for an assistantship, have you arranged to have two additional letters of recommendation from persons evaluating your work performance?
- **Exercise and sport sciences, speech-language pathology, and teachers of the speech and hearing handicapped majors**: Have you made arrangements to send your official GRE scores?
- **Communication majors**: Have you included a brief letter describing your educational or professional experience related to corporate communications, and stating your goals in pursuing graduate study in this field at Ithaca College?
Mr./Ms. _______________________________________________________________________________________________________

Legal address
Street and No. _________________________________________________________________________________________________
City State Zip

Mailing address
Street and No. _________________________________________________________________________________________________
City State Zip

Present position _________________________________________  Date of Birth _____________________________________________

Telephone  Home Work/School _________________  E-mail address ___________________________________

Country of citizenship _____________________________________________  Social Security No. _______________

Have you previously applied for admission to Ithaca College graduate studies?  q No  q Yes  When? ________________________

Have you taken graduate courses at Ithaca College?  q No  q Yes  When? ________________________

Number of years teaching experience _____________  Do you have New York State provisional certification?  q No  q Yes

Colleges attended

<table>
<thead>
<tr>
<th>Institution</th>
<th>Dates</th>
<th>Major</th>
<th>Credits earned</th>
<th>Degree</th>
</tr>
</thead>
</table>

Official transcripts of all academic work beyond secondary school must be sent directly to the dean of graduate studies.

Which degree do you expect to complete at Ithaca College (check area)?  q Master of science  q Master of music

Which program?  q Exercise and sport sciences— emphasis in  q Exercise physiology  q Sport pedagogy  q Sport Psychology  
q Communication  q Music (specific program)  
q Speech-language pathology  q Teacher of the speech and hearing handicapped  
q Thesis option  q Non-thesis option

Music Applicants – what is your performance area? _____________  Will you be pursuing Suzuki courses?  q No  q Yes

When do you expect to begin study?  Fall __________  Spring __________  Summer __________

Do you expect to study full-time?  q Yes  q No  q Summers Only (Music Applicants Only)

Are you applying for an assistantship?  q No  q Yes

Recommendations (List persons you have asked to write a recommendation evaluating your academic ability and/or performance):

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Address</th>
</tr>
</thead>
</table>

US citizens and permanent residents only — Please indicate your racial or ethnic origin (response optional). If multiracial, check all that apply and circle the one with which you most strongly identify.

q Black or African American  q American Indian or Alaskan Native  q Asian, Asian American, or Pacific Islander  
q Hispanic or Latino  q White, Anglo, or Caucasian (non-Hispanic)

Are you a nonresident alien?  q Yes  q No  Length of time in the U.S. _________________

Any additional information you wish to give concerning undergraduate preparation, advanced study, teaching experience and professional interests will be helpful and is encouraged. (Please use reverse side.)

A nonrefundable fee of $40 must accompany this application.
Application for Graduate Assistantship

Please type or print in black ink
Please fill out and return to Dean of Graduate Studies, Ithaca College, 111 Towers Concourse, Ithaca, NY 14850-7142
607-274-3527

Mr./Ms. _____________________________________________

Last                                      First                        Middle (Maiden)

Mailing address _________________________________________________________________________________________________

Street and No.         City              State          Zip

Present position ___________________________ Date of Birth _____________________ Social Security No. ____________________

Telephone  Home ___________________ Work ___________________ E-mail address __________________________

Briefly, what are your professional goals? _______________________________________________________________________________

________________________________________________________________________________________________________________

In accordance with your area or interest, what types of work would you like to do as a graduate assistant ______________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

What kind of experience do you expect to gain from this type of work? _______________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

What qualifies you for this graduate assistantship? ________________________________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

Work experience (related work that qualifies you for this graduate assistantship)

Position  Type of work  Dates employed

Position  Type of work  Dates employed

Other work experience

Position  Type of work  Dates employed

Position  Type of work  Dates employed

References (List persons, other than those who will be evaluating your academic work, whom you have asked to write a recommendation evaluating your work performance.)

Name  Position  Address

Name  Position  Address
Mr./Ms. __________________________________ has applied for admission to pursue graduate study at Ithaca College. The applicant has informed us that you would submit a personal recommendation to support the application. The Graduate Committee on Admissions would appreciate having you write a statement in the space below and return it as soon as possible in order that the applicant may be given early consideration.

Name _____________________________________________ Occupation or position __________________________________________

Address __________________________________________________________________________________________________________

I understand that, pursuant to federal statute Public Law 93-330, the above letter of reference may be reviewed by the person for whom it is submitted as part of his or her record at Ithaca College.

______________________________________ _____________________________ Date Signature

Candidate’s signature — in compliance with Public Law 93-330:
☐ I waive my right to view this evaluation.
☐ I do not waive my right to view this evaluation.

______________________________________ _____________________________ Date Applicant’s signature