



Kremen School of Education and Human Development

# Application to Graduate Program

Semester \_\_\_\_\_

Cohort (if any) \_\_\_\_\_

Please select the Graduate program you are applying for or continuing with:

Master of Arts in:  Teaching (Online Graduate Program)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Former Name \_\_\_\_\_ Student ID \_\_\_\_\_

Home Phone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_ Email \_\_\_\_\_

## Educational Background

Undergraduate Degree \_\_\_\_\_ Major \_\_\_\_\_ Institution \_\_\_\_\_ Term Graduated \_\_\_\_\_

Graduate Degree \_\_\_\_\_ Major \_\_\_\_\_ Institution \_\_\_\_\_ Term Graduated \_\_\_\_\_

Current California Credential- Type of Credential \_\_\_\_\_ Institution \_\_\_\_\_ Date Expires \_\_\_\_\_

## Teaching Performance Assessment

Assessment Scores (TPA, PACT, FAST, etc.): Task One \_\_\_\_\_ Task Two \_\_\_\_\_ Task Three \_\_\_\_\_ Task Four \_\_\_\_\_

Signature of verification that your scores are correct: \_\_\_\_\_

## Application Requirements

1. Proof of application to Fresno State or current enrollment at Fresno State
  - CSU Mentor confirmation page
  - Transcripts showing current enrollment
2. Transcripts (copy of official or unofficial)
3. Statement of Purpose
4. Reflection or one of the following: TPA, PACT, FAST, ect scores
5. 3 Letters of Recommendation
6. Copy of valid Teaching Credential or Private School Employee Contract or access to a classroom
7. Proof of Writing Competency (any of the items below will satisfy the requirement)
  - CBEST – score of 41+ on writing section OR pass all sections of the entire test
  - CSET –pass all three sections of the Multiple Subject test and the Writing Skills test
  - Upper Division Writing Exam (UDWE)
  - Any Fresno State “W” course with “B” or better
  - Substitution request approved by Graduate Coordinator (form available on Kremen website)

Please print application packet and include all required documents as detailed above. Bring the completed application packet to the Education Student Services Center, ED 100 or mail to:

Kremen School of Education and Human Development  
 Attn: Graduate Admissions Analyst  
 5005 North Maple Ave. M/S 701  
 Fresno, CA 93740-8025



Kremen School  
of Education and  
Human Development

# Statement of Purpose

\_\_\_\_\_

Last Name

\_\_\_\_\_

First Name

\_\_\_\_\_

Middle Initial

In the space provided below (or an attached page), provide relevant information about yourself including goals, objectives, and experiences related to the master's degree and/or advanced credential/certificate program to which you are applying. Please focus primarily on your short-term and long-term professional goals. You may attach additional pages. (1-2 pages maximum)



Kremen School of Education and Human Development

# Letter of Recommendation Rubric

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

**To the Applicant:** Complete the information requested above and give to the person(s) providing the reference(s). Please note that, generally, confidential recommendations often provide more useful information. **In accordance with the Family Education Rights and Privacy Act of 1974, the California Information Practices Act of 1977, and the related policies and regulations, it is also understood that upon request, this letter will not be made available to the applicant (or candidate) for examination.** If you agree, you may sign the waiver below. The decision is up to you.

I waive the rights to see or inspect this form or any statement sent to the indicated program as a result of this request.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Evaluator please complete the section below

The Kremen School of Education and Human Development would appreciate a statement from you evaluating the person named above for enrollment in and successful completion of an advanced credential and/or Master degree program. If additional space is needed, the back of this form may be used. Please feel free to use your own letterhead and disregard this page. **Please provide the applicant with this form in a sealed envelope with your signature across the seal.**

Please rate the applicant with other individuals seeking comparable experiences.

|                            | Superior | Above | Average | Below |
|----------------------------|----------|-------|---------|-------|
| Intellectual Ability       |          |       |         |       |
| Imagination and Creativity |          |       |         |       |
| Interest and Enthusiasm    |          |       |         |       |
| Ability to Communicate     |          |       |         |       |
| Stability                  |          |       |         |       |

If you alone were making the decision as to whether or not the applicant should be accepted, which of the following would you do?

|                          |                   |  |
|--------------------------|-------------------|--|
| <input type="checkbox"/> | Seek out          | Will be a truly outstanding student and professional                           |
| <input type="checkbox"/> | Definitely Accept | Will complete the program at a superior level                                  |
| <input type="checkbox"/> | Accept            | Should complete the program at a satisfactory level                            |
| <input type="checkbox"/> | Accept            | Accept, but with reservation concerning ability or motivation (please explain) |
| <input type="checkbox"/> | Do not accept     | Please explain   |

Signed \_\_\_\_\_ Date \_\_\_\_\_ Position \_\_\_\_\_

Contact Number \_\_\_\_\_ Email \_\_\_\_\_

**This letter of recommendation is to be included with other application materials and submitted in one complete packet. Do not send separately.**



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