



Please complete and mail to:

Doctoral Admissions Review Committee
School of Education
Notre Dame of Maryland University
4701 North Charles Street
Baltimore, MD 21210-2404

INSTRUCTIONAL LEADERSHIP FOR CHANGING POPULATIONS

I. AUTOBIOGRAPHICAL INFORMATION

Legal name Last First Middle

Permanent address Street City State Zip

Social Security number Date of birth

Home telephone ( ) Work telephone ( )

E-mail Cell phone ( )

Citizenship Status

U.S. citizen Yes No Citizenship if other than the U.S. (country)
Are you a permanent resident of the U.S.? Yes No
If not U.S. citizen: Are you a resident alien? Yes No
Will you need an I-20 (student visa) form? Yes No
What is your U.S. visa status?
Do you possess a green card? Yes No
Is English your second language? Yes No

I understand this information is requested solely for the purpose of determining compliance with the Federal Civil Rights law and my response will not affect consideration of my application.

Gender: Male Female

Are you Hispanic/Latino? Yes No

Race (you can choose one or more categories)

- American Indian or Alaskan Native Asian
Black or Non-Hispanic Native Hawaiian or Other Pacific Islander
White

Religion

II. PREVIOUS EDUCATION/EMPLOYMENT

Colleges and universities attended. (Applicant is responsible for having all official transcripts from all colleges attended forwarded to the office of graduate admissions, including official transcripts of any previous postbaccalaureate study.)

Table with 5 columns: Name of school, City and State, Dates attended, Degree, Major. Rows 1-5.

**Employment record** *(relevant to your application for admission)*

Organization	Address	Phone
Position	Dates of employment	
Organization	Address	Phone
Position	Dates of employment	
Organization	Address	Phone
Position	Dates of employment	

**Names of persons who will submit letters of recommendation**

Name	Address	Position
Name	Address	Position
Name	Address	Position

**Prior teaching/administrative/counseling certifications and licenses**

Field of Licensure	Level	State	Year Received
1. _____			
2. _____			
3. _____			

**Honors or scholarly achievements**

\_\_\_\_\_  
\_\_\_\_\_

**Tests** *(Official scores must be reported by the testing agency.)*

GRE  Taken  Plan to take \_\_\_\_\_ Miller Analogies Test  Taken  Plan to take \_\_\_\_\_  
Date Date

**III. REQUIRED GRADUATION PROGRAM INFORMATION**

Planned date of entry into program \_\_\_\_\_  Fall  Spring  
Year

Other name(s) which may appear on transcripts \_\_\_\_\_

I hereby apply for admission. I affirm the truth of the above information and of any statements attached. I understand that Notre Dame operates on an honor system, and I affirm my intent of honesty throughout my graduate career.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**Non-Discrimination Policy** Notre Dame of Maryland University does not discriminate in its educational policies on the basis of race, color, national origin, ethnic origin, sex, age, disability, genetic information, sexual orientation, or protected veteran's status. The following person has been designated to handle inquiries regarding the non-discrimination policy: *Vice President for Student Development, Notre Dame of Maryland University, 4701 N. Charles Street, Baltimore, MD 21210, 410-532-5308.*

**For Doctoral Admissions Review Committee use only**  
**Doctoral Admissions Review Committee, Doctoral Program:**  
Department Recommendation for Admission: Date \_\_\_\_\_  Admit  Deny  
\_\_\_\_\_  
Signature of Dean of Education \_\_\_\_\_ Date \_\_\_\_\_