Graduate Application for Admissions

Office of Admissions
Castleton University
86 Seminary Street
Castleton, Vermont 05735

1-800-639-8521
802-468-1213
fax: 802-468-1476
www.castleton.edu

2020-2021
Online applications are welcome
castleton.edu/admissions
BIOGRAPHICAL INFORMATION

Preferred title: Mr. _____ Mrs. _____ Ms. _____ Other _____ If you have academic records under another name, please indicate _______________

Legal Name ______________________________________________________________________________________________________________________

Last Name                   First Name/Given Name                                         Middle             Suffix

Permanent address _______________________________________________________________________________________________________________

City _________________________________  State/Province ______________________  Zip code  _______________ Country ______________________

Mailing address (if different from above) _____________________________________________________________________________________________

City _________________________________   State/Province ______________________  Zip code  _______________ Country ______________________

Phone (home) _________________________________   (work) _________________________________   (mobile) ________________________________

Present occupation/job title ___________________________________________   Applicant E-mail  ___________________________________________

Social security number (U.S.) _______________________________       Date of birth  ______/______/______   Sex:  Male _____  Female _____

State of legal residence  ____________________________________           Gender Identity: ____________________

Are you a U.S. citizen?  Yes  _____   No  _____  (If no, country of citizenship) _________________________   Country of birth _____________________

Are you a resident alien?  Yes  _____   No  _____   Primary language spoken at home, other than English ______________________________________

Have you ever been convicted of a felony, misdemeanor, or other crime?  Yes  _____   No  _____   If yes, please attach a detailed explanation.

Have you ever been suspended from an institution?       Yes  _____   No  _____   If yes, please attach a detailed explanation.

Have you previously enrolled at Castleton?   Yes  _____   No  _____   If yes, when _____________________________________________

Will you be applying for a graduate assistant position?   Yes  _____   No  _____     If yes, what department __________________________________

Will you be receiving Veteran's benefits?   Yes  _____   No  _____

How did you first learn about Castleton?   Admissions Representative  _____  Alumnus/Alumna  _____  College Fair  _____  Employer  _____

Publication  _____  Radio  _____  School Counselor  _____  Social Media  _____  Student  _____  Teacher  _____  Website  _____

Other  _____  Name ________________________________________________________________

Names of relatives who have or are currently attending Castleton _______________________________________________________________________

ETHNICITY

Colleges and universities are asked by many, including the federal government, accrediting associations, college guides, newspapers, and our own college community, to describe the racial/ethnic backgrounds of our students and employees. In order to respond accurately to these requests, we ask that you provide us with the following information. Please answer both questions:

1) Are you Hispanic/Latino?  Yes  _____   No  _____

2) Select one or more from the following to describe your racial background: American Indian/Alaskan Native _____     Asian _____

Black or African American _____    Native Hawaiian or Pacific Islander _____    White _____

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
List in chronological order all colleges and universities attended. You must request that official transcripts be sent directly from the institution to the Castleton Admissions Office. Use an additional sheet if necessary.

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<th>INSTITUTION</th>
<th>DATE OF ATTENDANCE</th>
<th>MAJOR</th>
<th>NAME OF DIPLOMA</th>
<th>DATE RECEIVED</th>
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Names of persons who will be submitting letters of recommendations:

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<th>NAME</th>
<th>ADDRESS</th>
<th>POSITION</th>
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Employment Record:

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**PROGRAM APPLICATION**

What is your program of application?

___ Master of Arts and Certificate of Advanced School Psychology
___ Master of Arts in Education: Curriculum and Instruction
___ Master of Arts in Education: Special Education
___ Master of Arts in Educational Leadership
___ Master of Athletic Training (must apply through ATCAS)
___ Master of Business Administration
     ___ Accounting
     ___ Analytics
     ___ Healthcare Administration
     ___ Leading Organizational Change
     ___ Media and Communication
___ Master of Music Education (starts in summer only)
___ Master of Science in Athletic Leadership
___ Continuing Education - School Principal Endorsement
___ Master of Science in Nursing

When do you hope to enroll at Castleton? Please select one.

- [ ] Spring
- [ ] Summer
- [ ] Fall

Do you hold any teaching, administrative or counseling licenses? Yes _____ No _____ If yes, please list below.

If you have spoken or corresponded with any member of the Castleton University faculty regarding your application, please list name(s) and approximate date(s) __________________________
NON-DISCRIMINATION, EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION

Every member of Castleton University should work to ensure non-discriminatory processes and practices with faculty, staff, and students.

Qualified students are recruited for, admitted to, and participate in all college programs without discrimination on the basis of race, color, gender, sexual orientation, religion, creed, national origin, age, veteran status, or disability. The university will provide reasonable accommodations to create equal opportunity for students with known disabilities.

Faculty, administrators, and staff are employed without discrimination on the basis of race, color, gender, sexual orientation, religion, creed, national origin, age, veteran status, or disability unrelated to job requirements. The university will make reasonable accommodations to the known disability of an otherwise qualified applicant or employee. Additionally, the university will engage in affirmative efforts to recruit, admit, and support students, and to recruit, employ, and support employees, in order to achieve the diversity which advances the educational mission.

Castleton University complies with state and federal laws related to equal opportunity and non-discrimination. Any question or complaint about potential or perceived discrimination in violation of any state or federal law should be directed to Janet Hazelton, Equal Opportunity Officer, Woodruff Hall, (802) 468-1208; or the Vermont State Colleges Office of the Chancellor in Montpelier; or the Vermont Office of the Attorney General; or the Equal Opportunity Employment Commission in Washington, D.C. Please contact Janet Hazelton, Equal Opportunity Officer, if auxiliary aid or service is needed to apply for admission or employment.

STUDENT RIGHT-TO-KNOW/CAMPUS CRIME

The United States Department of Education requires colleges and universities to make available annual statistics on our student’s continuation and graduation rates. Contact the Admissions or Communications offices for this information. Additionally, Castleton’s annual security report provides information about the operation of the University’s Public Safety Department; university safety and security, alcohol and drug, and sexual assault policies; and campus crime statistics for a variety of crimes including murder, manslaughter, sex offenses, robbery, burglary, and motor vehicle theft, along with information regarding on-campus alcohol, drug, and weapons violations. The report is available on the university’s web site.

I HEREBY DECLARE

The information submitted on this form is true and correct to the best of my knowledge. I understand that withholding information requested in this application or giving false information may make me ineligible for admission to or continuation at Castleton. With this in mind, I certify that the above statements are correct and complete.

I understand that, if admitted, I will be required to submit a completed health form including a record of immunizations as required by Vermont State Statute, in order to register for classes.

I understand that Castleton University may wish from time to time to provide public notice of certain student accomplishments and/or to use photographs of students for publications in various types of college promotional material. I do hereby give my permission to Castleton University to provide public notice of my accomplishments as it may feel appropriate, and/or to use my photograph, without compensation, in published promotional material. If you do not grant permission please attach a signed letter requesting us to withhold public use of name and photo. Not attaching a note signifies acceptance.

Credits earned at the Vermont State Colleges are transferable to other colleges or universities only at the discretion of the receiving institution. Information provided on the Application Form will be released to other Vermont State Colleges for admission purposes. In consideration of the undertaking by the Admissions Office to process this form, the undersigned agree that the information furnished on this application for admission form, together with all information and materials of any kind received by the Admissions Office from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed except as provided by PL 93-380 “Family Rights and Privacy Act.”

I understand that withholding information requested in this application or giving false information may make me ineligible for admission to or continuation at a Vermont State College institution. I certify that the above statements are correct and complete.

The information submitted on this form is true and correct to the best of my knowledge. I understand that withholding information requested in this application or giving false information may make me ineligible for admission to or continuation in Castleton University. With this in mind, I certify that the above statements are correct and complete.

Applicant’s Signature __________________________________________ Date ______________________

Please enclose a $40 application fee, payable by check or money order to Castleton University.