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| csunwordmark | APPLICATION FOR ADMISSION TO MASTER’S DEGREE PROGRAM: Curriculum & Instruction  |
|  | Department of Secondary EducationMichael D. Eisner College of Education |

## Personal Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | ( ) |  | ( ) |
| *name* |  | *home phone* |  | *work phone* |
| *street* |  | *email* |
| *state, zip* |  |  |  | *date* |

# College / University Education

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *institution* | *dates* | *major* | *minor* | *degree* |
|  |  |  |  |  |
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## Teaching Experience

|  |  |  |  |
| --- | --- | --- | --- |
| *years* | *school* | *address* | *subjects taught* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Teaching Credential(s)**

|  |  |  |
| --- | --- | --- |
| *state* | *subjects* | *year* |
|  |  |  |
|  |  |  |

**Professional References**

Please list below the names and addresses of three persons who have known you for at least one year and who have direct knowledge of your professional work.

|  |  |  |  |
| --- | --- | --- | --- |
| *name* | *address* | *position* | *years known* |
|  |  |  |  |
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|  |  |  |  |

## Personal Statement

On the reverse side of this form, please write a brief statement describing your teaching background, experiences, and professional goals.