



APPLICATION TO THE POST-BACCALAUREATE CERTIFICATE - FOUNDATIONS OF ARCHAEOLOGICAL KNOWLEDGE

NOTE: Applying to this program is a two application process: you must apply to both the University and directly to the Anthropology department. Your file will not be complete until you have applied to both. You can find more information about your application to the University at the CSUN Admission & Records [Apply Graduate Student](#) web page.

Application Checklist:

- ___ Applied to CSUN through the [Cal State Apply](#) website.
- ___ Transcripts from ALL colleges and universities attended sent to CSUN (must be official)
- ___ Transcripts from ALL colleges and universities attended sent to Department of Anthropology (unofficial are acceptable)
- ___ One page written statement indicating research and career objectives
- ___ Resume or curriculum vitae
- ___ Requested one letter of recommendation from faculty or supervisor focused on your projected ability to succeed in graduate level coursework (to be emailed by the referee from a work *(not personal)* email account directly to the Department of Anthropology).

ALL materials should be emailed to:

anthro@csun.edu

Subject: Application to the {insert program name here} / {student's name here}



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Application Cover Sheet

NAME _____ (first) _____ (middle) _____ (last)

PRESENT ADDRESS _____ (street) _____ (apt or unit)
_____ (city) _____ (state) _____ (zip code)

PERMANENT ADDRESS _____ (street) _____ (apt or unit)
_____ (city) _____ (state) _____ (zip code)

Email address: _____

Alternative email address: _____

WORK ADDRESS _____ (organization or business name)
(if applicable)
_____ (street) _____ (apt or unit)
_____ (city) _____ (state) _____ (zip code)

Phone _____ mobile ___ home ___ work

Alternative phone _____ mobile ___ home ___ work

EDUCATIONAL HISTORY. Please list below information concerning all colleges or universities that you have attended. If you have attended more than 3, please attach an additional sheet.

Name and location of Institution	Dates Attended	Major	Degree & Date Awarded/Expected, if applicable

PERSON PROVIDING LETTER OF RECOMMENDATION

Name _____

**Organization
or Institution** _____

Title _____