



Dear Applicant,

Welcome and thank you for your interest in the Department of Counselor Education and Counseling Psychology (CECP). The mission of the Department of Counselor Education and Counseling Psychology is to develop competent, ethical and culturally sensitive counselor education and counseling psychology professionals through graduate education and scholarship. To accomplish this mission, the department offers doctoral training in counseling psychology and counselor education and master's level training in counseling psychology, counselor education (college counseling; clinical mental health counseling; marriage, couples and family counseling; and school counseling), and rehabilitation counseling and rehabilitation counseling/teaching with a concentration in blindness. We strive to recruit and retain students of diverse racial/ethnic backgrounds from local, state, national and international locations. We look forward to receiving your complete application.

This is the CECP department Ph.D. in Counseling Psychology supplemental application form. Please carefully read and complete this entire form. You should download this supplemental application form and save it on your computer until completed. Once complete please upload the form to your TargetX application account. The completed form should be saved and uploaded as a pdf file. If you are unable to save as a pdf file you may upload as a word file.

All application materials for admission to the Counseling Psychology Ph.D. program must be received by December 1. If Dec. 1 falls on a weekend or holiday all application materials must be received by the next business day. Initial review of applicants is based on:

- An assessment of a student's grade point average
- Appropriateness of academic preparation
- Relevance of professional experience
- Quality of references
- Appropriateness of career goals
- Quality of submitted writing samples

In mid-February, selected applicants are scheduled for interviews with faculty and current students. Applicants not selected for interviews will be notified. Following the interview process, the counseling psychology training committee decides which applicants will be offered admission into the program. Notification of acceptance, alternate status, or denial is made in early to mid-March. Offers of admission must be accepted or declined by April 15.

The Graduate College at Western Michigan University has waived the GRE for doctoral admissions until fall 2022. The Counseling Psychology Doctoral Program supports this decision and also waives the GRE for admission decisions until fall 2022. GRE scores may, however, assist faculty in helping students to capitalize on areas of strength and challenge during their time in the program. If you have GRE scores that you would be willing to share with the program, please email them to [tammie.klinger@wmich.edu](mailto:tammie.klinger@wmich.edu) with the subject GRE for CPSY - YourLastName.

**As part of your application submission you are required to have the three letter of recommendation forms that are part of the on-line application completed. Be certain that persons who are knowledgeable of your academic work and/or your professional experience to date fill out the recommendation forms, e.g. professors, employers, supervisors. If you have questions about the appropriateness of references, please call the department office. In addition to the standard required recommendation form, recommenders may attach a separate letter of reference in addition to the standard recommendation form.**

**Also, as part of your resume, in addition to the standard elements of a resume (e.g. educational and paid work experience, etc.), be sure you identify and clearly label all volunteer human service experience, including starting and ending dates.**

Please visit our homepage at <http://www.wmich.edu/cecp/> for additional information.

We appreciate your interest in our programs. If you have any questions about any part of the application feel free to contact our office at 269-387-5100 and we will assist you.

Sincerely,

*Carla Adkison-Johnson, PhD*

Carla Adkison-Johnson, Ph.D., LPC  
Interim Department Chair and Professor

**DEPARTMENT OF COUNSELOR EDUCATION AND COUNSELING PSYCHOLOGY**

**CECP Counseling Psychology Ph.D. Supplemental Application Form**

**Applicant's Name:**

**WIN Number** (*Western's Identification Number*):

**Date of Birth:**

**Date:**

mm/dd/yyyy

**I. Undergraduate and Graduate Education:**

**a.**

Institution

City, State , ZIP

Dates of Attendance

Degree/Major

Psychology/Counseling Credit hours

GPA

Cumulative Credit hours

GPA

**b.**

Institution

City, State , ZIP

Dates of Attendance

Degree/Major

Psychology/Counseling Credit hours

GPA

Cumulative Credit hours

GPA

**c.**

Institution

City, State , ZIP

Dates of Attendance

Degree/Major

Psychology/Counseling Credit hours

GPA

Cumulative Credit hours

GPA

**d.**

Institution

City, State , ZIP

Dates of Attendance

Degree/Major

Psychology/Counseling Credit hours

GPA

Cumulative Credit hours

GPA

**II. Relevant Professional Experience:**

Click here to enter text.

**III. Relevant Volunteer, Practica, and /or Internship Experience:**

Click here to enter text.

Click here to enter text.

**IV. List any honors, prizes, distinctions, scholarships, fellowships, publications, and professional association memberships:**

**V. Write a brief description of your professional goals. Please indicate some discussion of your desired work setting and duties associated with your particular role:**

Click here to enter text.

**VI. If admitted:**

- A.** I realize that the program prefers full-time continuous enrollment in at least 9 or more graduate hours per fall and spring semester.  
Select one:  *Yes*  *No*
- B.** I  *will*  *will not* need financial assistance and / or part-time employment during the residency period.
- I  *have*  *have not* submitted an application for financial assistance.
- I  *have*  *have not* submitted an application for an assistantship/associateship.
- C .** I realize the program requires completion of a 2000 clock hour predoctoral internship at an APA approved site. This may require a geographical move.  
Select one:  *Yes*  *No*

**Questions and Acknowledgment**

**General Information:** Today a wide range of professional healthcare and mental health care organizations, agencies, schools and other educational/service organizations providing counseling and clinical services require criminal background checks before permitting individuals to train and/or work in their setting. These may be organizations providing services to potentially vulnerable clients (e.g. young children, juveniles, psychiatric inpatients, elders) and health and mental health care organizations where there is a well-recognized need for individuals in training and working professionally to practice safely. To facilitate movement through and successful completion of our programs, including access for training in our departmental training clinics (i.e., CCPS-Kalamazoo and CCPS Grand Rapids), we ask applicants to respond to the criminal history questions below, and to subsequently complete a criminal history background check after receiving an offer of admission and prior to completion of the first semester in their program of study. Requesting you to do the background check early is to ensure that you are able to move through your program of study as easily as possible while we also live up to our goal of protecting vulnerable clients. If any applicant's background check comes back positive, we will review your circumstances on an individual basis and will take into consideration the type of convictions, your age at the time of the incident and the amount of time that has elapsed since the last incident. In essence, we will work with you to assess the potential impact on your career and assist in mitigating its impact to the extent that is possible as well as work with you on determining the next steps in your career. Thus, faculty reviewing applications for admission may wish to talk to applicants as part of the admission process if a reported history has possible training and career implications.

**Criminal Conviction History Questions:**

Please answer the following two questions; complete the Statement of Learning from Life Experiences if applicable, and then sign the Acknowledgment and Agreement Statement.

(1) Excluding minor civil traffic violations, have you ever been convicted, pleaded guilty to, or and/or entered a no contest plea to a felony or misdemeanor?

Yes       No

If Yes, list date, charge, place, court and action taken. A prior conviction does not necessarily mean that you cannot be admitted to the program to which you have applied. Criminal convictions will be considered in relation to any training and/or career implications for the program to which you have applied. (If applicable, responses may be typed in the expandable area below.)

Click here to enter text.

(2) Do you currently have any felony or misdemeanor charges pending against you, other than minor traffic offenses?     Yes    No    If Yes, explain fully    (If applicable, responses may be typed in the expandable area below.)

Click here to enter text.

**Statement of Learning from Life Experiences:** Applicants with a criminal conviction history are invited to provide a written statement addressing subsequent learning from life experiences. This invitation is an opportunity to increase our understanding of you in reviewing your application. (If applicable, responses may be typed in the expandable area below.)

Click here to enter text.

## **Acknowledgment and Agreement Statement:**

I understand and agree that if I am accepted for admission and enroll in the program I have applied to in Department of Counselor Education and Counseling Psychology (CECP) that I will complete the background check procedures established by the CECP department at my expense after being accepted and prior to the conclusion of my first semester in the program. I understand that if I do not complete the CECP department's established background check procedures prior to completion of my first semester that I may not continue to take courses until the background check is completed.

To complete the background check process I understand that students accepted for admission and enrolling for the first time:

for a fall semester must request and start their background check by October 1.

for a spring semester must request and start their background check by February 1.

for a summer I session must request and start their background check by June 1.

for a Summer II session must request and start their background check by October 1.

A program registration hold will be placed on a student's account if the appropriate deadline for starting the background check process is not met.

I understand that if my background check indicates that I have not provided accurate information and/or that I have not disclosed a history of criminal conviction in my answers on my application that I may be dismissed from the program.

I understand and agree that once admitted I will self-report any subsequent arrests or convictions immediately to the CECP department chair. Failure to do so may result in dismissal from the program.

I understand that external training and/or internship placement sites may vary in their background check requirements, procedures, and standards for accepting candidates into their respective professional settings. External sites may require their own separate criminal background checks and procedures.

**I understand that if I have been convicted of a felony or misdemeanor, these incidents may make it difficult to obtain required external/internal agency training experiences (i.e., practicum, field practicum, internship), and if unable to obtain these required experiences I will not be able to complete my program of study and graduate.**

I am further aware that if I have been convicted of a felony or misdemeanor, I may not be eligible for licensure or certification by the State of Michigan **or by other jurisdictions**. The Michigan Board of Counseling and the Michigan Board of Psychology have indicated on their web pages that applicants who have been convicted of a felony or misdemeanor will be "reviewed on an individual basis," and that they "take into consideration the type of conviction, the age that you were when the incident occurred and the time that has elapsed since the conviction."

Retrieved June 11, 2014 from

[http://www.michigan.gov/lara/0,4601,7-154-35299\\_63294\\_27529\\_27536-136661--,00.html](http://www.michigan.gov/lara/0,4601,7-154-35299_63294_27529_27536-136661--,00.html)

I understand that eventual eligibility for professional licensure is determined by the professional licensing board in the relevant jurisdiction. Professional licensing laws and regulations vary from state to state; and questions concerning eventual eligibility for professional licensure should be directed to the appropriate professional licensing board in the relevant jurisdiction.

**Resources on Implications of History of Criminal Convictions and Employment in Health Care, Mental Health Care and Education Settings.**

I understand that information on the possible implications of a history of criminal convictions and employment, contracting, and clinical privileges in certain public health care, mental health care and educational settings in Michigan is available in the Michigan Public Health Code, the Michigan Mental Health Code and information related to criminal convictions and certification by the Michigan Department of Education.

**Ethics:**

I am aware that students admitted to or taking courses in the Department of Counselor Education and Counseling Psychology are expected to abide by the ethical standards of the professional association relevant to their program of study. Links to each of the professional association relevant to department programs of study may be found at <http://www.wmich.edu/cecp/student-resources/ethics>

**Agreement:**

I certify that the foregoing statements and all information submitted by me in connection with my application for admission are true and correct. I understand that any false, incomplete, or misleading statement or omission by me in my application or credentials may be cause for my rejection for admission or my dismissal if already admitted.

By typing my name below and by submitting this section of the application I certify that I have read and agree with the above statements.

Electronic Signature: (Type in name)

Date