The seal of Valparaiso University is a circular emblem with a rope-like border. Inside the border, the words "VALPARAISO UNIVERSITY" are written in a circular path. At the top center of the seal is a torch with a flame. Below the torch, the Latin motto "VERITAS TUA VIDEMUS" is inscribed. At the bottom of the seal, the year "1859" is prominently displayed, flanked by two small stars.

VALPARAISO UNIVERSITY

APPLICATION FOR ADMISSION TO THE GRADUATE SCHOOL

**Kretzmann Hall Room 114
1700 Chapel Drive
Valparaiso, Indiana 46383-6493**

**Telephone: 1.219.464.5313
Toll Free: 1.800.821.7685
Fax: 1.219.464.5381**

**Email: Graduate.School@valpo.edu
Website: www.valpo.edu/grad**

We welcome your application for admission to the Graduate School of Valparaiso University. The mission of the Graduate School is to serve the advanced learning, professional development, and personal enrichment needs of individuals nationally and internationally. The Graduate School admits students that demonstrate the ability and motivation to succeed in an academically challenging environment.

APPLICATION PROCEDURE

To be considered for admission, ALL applicants must provide:

- This application form, completed and signed.
- \$30 application fee for US Citizens (\$20 application fee for students applying to a dual degree program).
- Official transcripts of all prior undergraduate and graduate coursework. If you have received an undergraduate or graduate degree from Valparaiso University, you are not required to submit an official transcript from Valparaiso University.

IF YOU PLAN TO SEEK A MASTERS DEGREE OR POST-MASTERS CERTIFICATE...

Check the program to which you are applying and note the *additional* requirements:

Program	2 Letters of Recommendation	Reflective Essay	Supplemental Application	Copy of RN License	EXAM	Pre-Professional Skills Test (PPST Scores)
<input type="checkbox"/> MA in English Studies & Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> MA in Chinese Studies (including Teachers Track)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Dual JD/MA in Chinese Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> MS in Digital Media	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MS in Sports Media	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MA in Liberal Studies (MALS)*	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Dual JD/MA in Liberal Studies	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MS in Information Technology & Management	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MS in International Commerce & Policy	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Dual JD/MS in International Commerce & Policy	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MS in International Economics and Finance	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MS in Sports Administration	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Dual JD/MS in Sports Administration	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MS in Nursing Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> BSN to Doctorate in Nursing Practice (DNP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Post-MSN Doctorate in Nursing Practice (DNP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> MS in Nursing (MSN)/MBA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> GMAT	
<input type="checkbox"/> Master of Education - Initial Licensure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
<input type="checkbox"/> Master of Education - LEAPs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
<input type="checkbox"/> Master of Education – Teaching & Learning (current teaching license required)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> M.Ed/Ed.S in School Psychology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> MA in School Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> MA in Clinical Mental Health Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> MA in Community Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Dual JD/Clinical Mental Health Counseling (JD/CMHC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Dual JD/Psychology (JD/MA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

*If you checked the MALS degree or MALS Post Graduate Certificate, please indicate which area of concentration you have chosen:

- English Ethics & Values Gerontology History
- Human Behavior & Society Individualized Other (please specify topic area): _____
- Theology/Theology & Ministry (includes Deaconess Track)

IF YOU ARE NOT SEEKING A DEGREE...

Check the category that applies to you and note the additional requirements:

Program	2 Letters of Recommendation	Reflective Essay	Supplemental Application	Statement from Adviser/Principal	Copy of Teaching License	Pre-Professional Skills Test (PPST Scores)
<input type="checkbox"/> Certificate Programs*	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> MALS Post Graduate Certificate	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Business Management Certificate	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Management Certificate for Counseling	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Management Certificate for Nursing	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Legal Studies & Principles Certificate	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> TESOL Certificate	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Teacher Certification, Transition-to-Teaching** or Addition of Content Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> ****	<input type="checkbox"/> ***
<input type="checkbox"/> Professional Educator			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Visiting Student				<input type="checkbox"/>		
<input type="checkbox"/> General Non-Degree Student						

** Transition-to-Teaching requires 3 Letters of Recommendation.

*** Necessary only for those individuals seeking a first-time teaching license.

**** License is required for content area applications only.

IV. EMPLOYMENT BACKGROUND (If you have professional experience, include your resume with this application.)

Name: _____ Job Title/Description: _____

Work Phone Number: (_____) _____ Work Address: _____

May we contact you at work? Yes Prefer Not

Will you receive employer reimbursement? Yes No Don't Know

Have you ever been convicted of a felony? No Yes; if yes, please explain fully on a separate sheet.

NOTE: Some states have restrictions on licensing or professionally credentialing an individual with a criminal record.

V. SELECTION OF VALPARAISO UNIVERSITY

How did you learn about Valparaiso University? (check all that apply)

- College Adviser Valpo Alumni Professor Recruiter
- Relative/Friend Religious Organization Printed Material Reference Material
- Internet Site (which site) _____
- Other (please specify) _____

Please list other graduate schools you are considering or to which you are applying:

Order the factor(s) (1 = most important) that will affect your choice for graduate school (rank all that apply).

_____ Reputation _____ Accreditation _____ Program of Study _____ Good Value for Cost
 _____ Location _____ Other (please specify) _____

VI. REFLECTIVE ESSAY

All applicants, except professional educators, visiting students, and general non-degree students, are required to submit a two-page personal statement or reflective essay indicating their purpose for undertaking graduate study and how this study relates to their professional and personal goals. This statement must be typed double-spaced on separate sheets and submitted with the application materials. Please note that the supplemental application for some degree programs provides further instructions for the personal statement.

The decision for admission to the Graduate School is not final until all required application materials have been received. Applicants granted conditional permission to register for classes may not be allowed to continue their coursework if they do not satisfy the admission requirements.

"I submit this application as a true and complete statement of facts for your consideration."

Signature of Applicant Required

Date

DO NOT WRITE BELOW THIS LINE. OFFICE USE ONLY.

APPLICATION APPROVED: _____

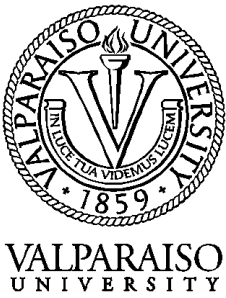
SENT TO COMMITTEE: _____

APPLICATION DENIED: _____

DEAN'S SIGNATURE: _____

APPLICATION FEE RECEIVED: _____

DATE: _____



VALPARAISO UNIVERSITY GRADUATE SCHOOL

MASTER OF EDUCATION IN INITIAL LICENSURE

VU-LEAPS: LUTHERAN EDUCATIONAL ALLIANCE WITH PAROCHIAL SCHOOLS

PART II: SUPPLEMENTAL APPLICATION FORM

1. NAME: _____

In order to qualify for the LEAPs program, you must be willing to:

- Accept modest accommodation while living in a community that values spiritual development from a Christian perspective
- Commit to the full 2-year program of study, community living, and exploration of spiritual growth.

Please note that in addition to the requirements for the Master of Education degree listed on p. 2 of the main application, the LEAPs program requires:

- A third letter of reference from a spiritual adviser, pastor, residence hall director, or supervisor who has worked closely with you and can speak about your spiritual development and/or your ability to live a simple lifestyle in community with other LEAPs participants.
- Evidence of passing scores on all 3 parts of the PPST, submitted to the graduate office by no later than February 15. Contact Sylvan Learning Centers for more information (1-888-EDUCATE).
- An essay based on the questions included in this supplemental application. This essay substitutes for the Reflective Essay (VI.) on the main application form.
- A signed copy of the enclosed waiver and release form.

2. Academic Background: list your undergraduate majors and minors:

Majors: _____

Minors: _____

3. Check the areas you are interested in teaching and/or feel qualified to teach:

- | | | |
|---|---|---|
| <input type="checkbox"/> Math/computers | <input type="checkbox"/> Science | <input type="checkbox"/> Physical Education |
| <input type="checkbox"/> English | <input type="checkbox"/> Foreign Language | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Social Studies | <input type="checkbox"/> Music/Arts | <input type="checkbox"/> Other _____ |

a. If your majors or minors are not related to the areas checked above, please describe your background in these areas, being as specific as possible.

b. If there is no position available in your desired areas, would you be willing to teach at another grade level and/or in another subject area? Explain your answer.

4. Please assess your knowledge of languages other than English as weak, good, or excellent.

	Language	Reading	Writing	Speaking
Excellent				
Good				
Weak				

5. Please list the grade levels you are interested in teaching and indicate your preference.

6. Have you applied to other graduate schools or programs for the next year? If so, list them.

7. VU-LEAPs teachers serve a variety of under-resourced parochial schools in Northwest Indiana and Chicago. Although teachers do not choose their placement site, they may indicate a preference for specific schools or locations in which they feel their talents and experience might be utilized best. Please feel free to comment.

PERSONAL ESSAY

Directions: please respond to the following questions in approximately three-four typewritten pages (double-spaced).

1. What personal goals and interests have led you to apply to the VU-LEAPs program, and how are these consistent with the goals of the program? (about 1 page)

2. What experiences, background, and attitudes have prepared you for the challenges involved in elementary or secondary school teaching? (about ½ page)

3. What experiences and attitudes have prepared you to work with students of diverse economic, cultural and minority backgrounds? (about ½ page)

4. Provide evidence that even during times of acute stress, you are able to put your own concerns aside in order to recognize and serve the needs of others. (about ½ page)

5. Discuss your willingness to live in simple, unadorned community housing with others. How do you see community living as contributing to your professional and personal growth? (about ½ page)

6. Provide evidence that you are spiritually open and mature and at the same time committed to Christian values. Include how you expect the LEAPs program to affect the development of your faith. (about ½ page).

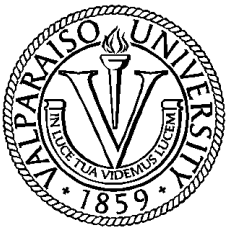
Signature: _____

Date: _____

SEND ALL APPLICATION MATERIALS TO:

Office of the Graduate School, Kretzmann Hall Room 114, 1700 Chapel Drive, Valparaiso University, Valparaiso, IN 46383.

Upon receipt of all admission materials, the Committee on Admissions for the graduate Education programs will review the file. The applicant will be notified in writing of the committee's decision. Questions should be addressed to the Office of the Graduate School at 219.464.5313 or 1.800.821.768.



VALPARAISO UNIVERSITY GRADUATE SCHOOL

RECOMMENDATION FORM

MASTER OF EDUCATION IN INITIAL LICENSURE

VU-LEAP: LUTHERAN EDUCATIONAL ALLIANCE WITH PAROCHIAL SCHOOLS

VALPARAISO UNIVERSITY

APPLICANT:

Please complete this section and give this form to the person making the recommendation, together with a stamped, pre-addressed envelope.

Applicant's Name (print): _____

Academic Program (print): _____

Recommender's Name (print): _____

The Family Education Rights and Privacy Act (20 U.S.C. 1232g) provides you with a right of future access to this recommendation once enrolled as a student. The Act also allows you to waive the right to access, but prohibits the Graduate School from requiring you to waive this right as a condition of admission or review and evaluation of an application for admission. If you waive your right to inspect this document, have your recommender enclosed the recommendation in a business envelope, seal, and sign across the back flap before returning it to you or the Graduate School.

Please select one of the following options and sign: I hereby waive do not waive my right.

Signature _____ Date _____

TO THE PERSON COMPLETING THIS RECOMMENDATION FORM:

The above named person has applied for admission to LEAPs Program of the Graduate School at Valparaiso University. Your comments and candid evaluation will greatly assist the Graduate School in deciding the extent to which the applicant will benefit from and contribute to the Graduate School.

SEND RECOMMENDATION FORM TO:

The Graduate School, Kretzmann Hall Room 114, 1700 Chapel Drive, Valparaiso University, Valparaiso, IN 46383.

I. How long have you known the applicant and in what capacity?

II. Please rate the applicant's abilities in comparison with others you have known at comparable stages of their careers.

Personal/Professional	Outstanding	Above Average	Average	Below Average	Cannot Assess
Academic Potential					
Motivation for Graduate Study					
Independence of Thought					
Judgment/Maturity					
Creativity/Resourcefulness					
Character					
Ability to Work with Others					
Oral Communication					
Written Communication					

Community Responsiveness	Outstanding	Above Average	Average	Below Average	Cannot Assess
Focus on others					
Ability to work with others					
Ability to work with children					
Empathy					
Tolerance					
Honesty					
Flexibility					
Ability to handle stress					
Ability to adjust to simple living accommodations					

Spirituality	Outstanding	Above Average	Average	Below Average	Cannot Assess
Ability to articulate Faith					
Involvement in service activities					
Openness to spiritual growth					

III. Additional Comments

A. The program to which the candidate is applying includes aspects of community living and spiritual development as well as academic study at the graduate level. Please indicate the candidate's strengths, areas in which he/she would benefit from improvement, and any additional information you have regarding the candidate's interest (of whatever nature) in this program. Include impressions relevant to the candidate's likelihood of contributing to and benefiting from simple community living and spiritual development. Please type these comments on a separate sheet and include with this form.

- B. I recommend this candidate highly. _____
 I recommend without reservation. _____
 I recommend with reservation. _____
 I do not recommend this candidate. _____

(Please indicate, if possible, the nature of your reservations. Use a separate sheet of paper if necessary.)

If you have questions about this form or other matters that you wish to discuss, feel free to contact the Dean of the Graduate School (219-464-5313; 800-821-7685).

Signature: _____ **Date:** _____

Title: _____ **Institution:** _____

Address: _____

City

State

Zip

Phone: (_____) _____
 Work

(_____) _____
 Home



VALPARAISO UNIVERSITY GRADUATE SCHOOL

RECOMMENDATION FORM

MASTER OF EDUCATION IN INITIAL LICENSURE

VU-LEAP: LUTHERAN EDUCATIONAL ALLIANCE WITH PAROCHIAL SCHOOLS

VALPARAISO UNIVERSITY

APPLICANT:

Please complete this section and give this form to the person making the recommendation, together with a stamped, pre-addressed envelope.

Applicant's Name (print): _____

Academic Program (print): _____

Recommender's Name (print): _____

The Family Education Rights and Privacy Act (20 U.S.C. 1232g) provides you with a right of future access to this recommendation once enrolled as a student. The Act also allows you to waive the right to access, but prohibits the Graduate School from requiring you to waive this right as a condition of admission or review and evaluation of an application for admission. If you waive your right to inspect this document, have your recommender enclosed the recommendation in a business envelope, seal, and sign across the back flap before returning it to you or the Graduate School.

Please select one of the following options and sign: I hereby waive do not waive my right.

Signature _____ Date _____

TO THE PERSON COMPLETING THIS RECOMMENDATION FORM:

The above named person has applied for admission to LEAPs Program of the Graduate School at Valparaiso University. Your comments and candid evaluation will greatly assist the Graduate School in deciding the extent to which the applicant will benefit from and contribute to the Graduate School.

SEND RECOMMENDATION FORM TO:

The Graduate School, Kretzmann Hall Room 114, 1700 Chapel Drive, Valparaiso University, Valparaiso, IN 46383.

IV. How long have you known the applicant and in what capacity?

V. Please rate the applicant's abilities in comparison with others you have known at comparable stages of their careers.

Personal/Professional	Outstanding	Above Average	Average	Below Average	Cannot Assess
Academic Potential					
Motivation for Graduate Study					
Independence of Thought					
Judgment/Maturity					
Creativity/Resourcefulness					
Character					
Ability to Work with Others					
Oral Communication					
Written Communication					

Community Responsiveness	Outstanding	Above Average	Average	Below Average	Cannot Assess
Focus on others					
Ability to work with others					
Ability to work with children					
Empathy					
Tolerance					
Honesty					
Flexibility					
Ability to handle stress					
Ability to adjust to simple living accommodations					

Spirituality	Outstanding	Above Average	Average	Below Average	Cannot Assess
Ability to articulate Faith					
Involvement in service activities					
Openness to spiritual growth					

VI. Additional Comments

C. The program to which the candidate is applying includes aspects of community living and spiritual development as well as academic study at the graduate level. Please indicate the candidate's strengths, areas in which he/she would benefit from improvement, and any additional information you have regarding the candidate's interest (of whatever nature) in this program. Include impressions relevant to the candidate's likelihood of contributing to and benefiting from simple community living and spiritual development. Please type these comments on a separate sheet and include with this form.

- D. I recommend this candidate highly. _____
- I recommend without reservation. _____
- I recommend with reservation. _____
- I do not recommend this candidate. _____

(Please indicate, if possible, the nature of your reservations. Use a separate sheet of paper if necessary.)

If you have questions about this form or other matters that you wish to discuss, feel free to contact the Dean of the Graduate School (219-464-5313; 800-821-7685).

Signature: _____ **Date:** _____

Title: _____ **Institution:** _____

Address: _____

City

State

Zip

Phone: (____) _____
Work

(____) _____
Home



VALPARAISO UNIVERSITY GRADUATE SCHOOL

RECOMMENDATION FORM

MASTER OF EDUCATION IN INITIAL LICENSURE

VU-LEAP: LUTHERAN EDUCATIONAL ALLIANCE WITH PAROCHIAL SCHOOLS

VALPARAISO UNIVERSITY

APPLICANT:

Please complete this section and give this form to the person making the recommendation, together with a stamped, pre-addressed envelope.

Applicant's Name (print): _____

Academic Program (print): _____

Recommender's Name (print): _____

The Family Education Rights and Privacy Act (20 U.S.C. 1232g) provides you with a right of future access to this recommendation once enrolled as a student. The Act also allows you to waive the right to access, but prohibits the Graduate School from requiring you to waive this right as a condition of admission or review and evaluation of an application for admission. If you waive your right to inspect this document, have your recommender enclosed the recommendation in a business envelope, seal, and sign across the back flap before returning it to you or the Graduate School.

Please select one of the following options and sign: I hereby waive do not waive my right.

Signature _____ Date _____

TO THE PERSON COMPLETING THIS RECOMMENDATION FORM:

The above named person has applied for admission to LEAPs Program of the Graduate School at Valparaiso University. Your comments and candid evaluation will greatly assist the Graduate School in deciding the extent to which the applicant will benefit from and contribute to the Graduate School.

SEND RECOMMENDATION FORM TO:

The Graduate School, Kretzmann Hall Room 114, 1700 Chapel Drive, Valparaiso University, Valparaiso, IN 46383.

VII. How long have you known the applicant and in what capacity?

VIII. Please rate the applicant's abilities in comparison with others you have known at comparable stages of their careers.

Personal/Professional	Outstanding	Above Average	Average	Below Average	Cannot Assess
Academic Potential					
Motivation for Graduate Study					
Independence of Thought					
Judgment/Maturity					
Creativity/Resourcefulness					
Character					
Ability to Work with Others					
Oral Communication					
Written Communication					

Community Responsiveness	Outstanding	Above Average	Average	Below Average	Cannot Assess
Focus on others					
Ability to work with others					
Ability to work with children					
Empathy					
Tolerance					
Honesty					
Flexibility					
Ability to handle stress					
Ability to adjust to simple living accommodations					

Spirituality	Outstanding	Above Average	Average	Below Average	Cannot Assess
Ability to articulate Faith					
Involvement in service activities					
Openness to spiritual growth					

IX. Additional Comments

E. The program to which the candidate is applying includes aspects of community living and spiritual development as well as academic study at the graduate level. Please indicate the candidate's strengths, areas in which he/she would benefit from improvement, and any additional information you have regarding the candidate's interest (of whatever nature) in this program. Include impressions relevant to the candidate's likelihood of contributing to and benefiting from simple community living and spiritual development. Please type these comments on a separate sheet and include with this form.

- F.I recommend this candidate highly. _____
- I recommend without reservation. _____
- I recommend with reservation. _____
- I do not recommend this candidate. _____

(Please indicate, if possible, the nature of your reservations. Use a separate sheet of paper if necessary.)

If you have questions about this form or other matters that you wish to discuss, feel free to contact the Dean of the Graduate School (219-464-5313; 800-821-7685).

Signature: _____ **Date:** _____

Title: _____ **Institution:** _____

Address: _____

City

State

Zip

Phone: (_____) _____
Work

(_____) _____
Home