

**COVER SHEET FOR GRADUATE APPLICATION MATERIALS
MIAMI UNIVERSITY
DEPARTMENT OF SPEECH PATHOLOGY AND AUDIOLOGY
2 Bachelor Hall
Oxford, Ohio 45056**

Identifying Information

Name: _____ Date: _____

E-mail: _____

Present Address:

Present Phone Number(s): Cell phone _____
Other _____

Permanent Address:

Permanent Phone Number(s):

State of Permanent Residency:

I wish to be considered for a Graduate Assistantship (Circle one):	YES	NO
I am interested in doing research:	YES	NO
I have research experience:	YES	NO

Academic and Clinical Credentials

Name of Undergraduate Degree Program _____

Major(s) _____

Minor(s) _____

Overall G.P.A. _____ Major G.P.A. _____

GRE:

Verbal _____ Quantitative _____ Total Score: _____ Analytical Writing _____

Number of documented clinical observation hours you estimate you will have completed upon graduation:

I have or will have experience providing clinic services in speech-language pathology or audiology by the time I graduate: YES NO

Number of documented clinic contact hours you estimate you will have completed upon graduation:

Statement of Career Objective

In one to two pages (typed) write your career objectives. For example, what are some important developments in the field that may influence your career in the next 5 years? Or, you may want to write about future research that you may want to engage in, or to discuss clinical populations that you find interesting.

Resume

Please include a resume outlining your skills and accomplishments. It need not be limited to 1 page. Do not list course work since that is available to us from your transcript. Instead provide us with information that may not be readily available from the application form. The following are some examples of the type of information that might be included:

academic awards and scholarships, presentations at conferences, types of clinical experience, volunteer experience, work experience and responsibilities, international travel, language proficiency, experimental research experience, presentations, assisting professor with literature searches for their work, web page maintenance or design, collegiate athletics.

Recommendations

A recommendation form is included in this packet. It must be filled out completely. Letters may be attached to the form to supply additional comments, but they must be typed on official letterhead. The recommendations may be enclosed with the rest of your application in a sealed envelope and signed across the flap by the individual who wrote the recommendation. You may also have the letters mailed directly to us.

- C. 1. Please estimate how well the applicant's grades reflect his/her academic potential.
Check the appropriate line below.

Grades over-estimate potential

Grades are a good estimate

Grades under-estimate potential

2. Please indicate the strength of your overall recommendation.

Not recommended

Recommended with reservation

Recommend

Highly Recommend

3. Would you accept this student into your graduate program?

Yes, with no reservations

Yes, with reservations

No

Name of person completing this form: _____ Title: _____

Signature: _____ Date: _____

Place of Employment: _____

Address: _____

Phone Number: _____ Email: _____

Please feel free to attach any additional comments using your official letterhead or write comments below:

Additional Comments