# CDIS Graduate Program Application

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## All information submitted in this application will be verified upon admission to the program. Please be prepared to provide documentation to support your report. Any applicant submitting information which cannot be substantiated will be dismissed from the CDIS Program. Applications submitted without Agreement and Signature (on the last page) will be rejected.

## This form MUST be submitted electronically using this template. Do NOT return this form in gif, pdf, rtf, xps, txt, xml, wps, or other file formats. This application MUST be submitted in MS Word in a doc or docx format. Files submitted in alternate formats will NOT be reviewed.

## The following documentation may accompany this form and may be sent in alternate formats.

## Professional license

## Observation hours

## Clock hour logs for practicum

## Verification of research experience documentation

|  |  |
| --- | --- |
|  |  |
|  |  |

# CDIS Graduate Program Application



## Student ID#

## Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | | |
| Address: |  | | |
| City: |  | State: | Zip: |
| Home Phone |  | Work Phone: | Cellular Phone: |
| Email Address 1: |  | | |
| Email Address 1: |  | | |

## Application Cycle

Students may apply for **one** **term** only. Applications will **not** be held on file for subsequent terms and reapplication will be necessary. Please indicate which term you are applying for below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Summer/Fall |  | Spring |  |  |

## Application Status

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Initial application |  | Re-application |  |  |

Students re-applying to the ENMU CDIS Program **will** need to submit a new application each term; however,   
re-applying candidates will **NOT** need to send new transcripts or GRE scores if they have indicated their   
re-application status above.

**If you have taken GRADUATE courses in CDIS/SLP please check this box.**

## Work Experience

Check any occupation you have been formerly employed and **licensed** as.

**To obtain credit for this experience, you MUST scan and email a copy of your license.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Teacher |  | ASL/SLPA |  | Interpreter |
|  | Counselor |  | PTA/COTA |  | Nurse/CNA |
|  | Other (specify) |  | | | |

## Observation Hours

**To obtain credit for this experience, you MUST scan and email your signed observation hours.**

These hours MUST be obtained as a part of a University course and do NOT include job shadowing, volunteer activities, or observations which you accrued independently. **ONLY clinical clock hour logs with the appropriate university supervisor’s signature will be accepted.**

|  |  |  |  |
| --- | --- | --- | --- |
| Hours Accrued |  | Hours Accrued |  |
| Supervisor |  | Supervisor |  |
| Site |  | Site |  |
| Contact Email |  | Contact Email |  |
| CCC # |  | CCC # |  |
| License # |  | License # |  |

If additional hours beyond those logged above are submitted with your email, check here

## Practicum Hours

**To obtain credit for this experience, you MUST scan and email your signed clinical clock hours.**

These hours MUST be obtained as a part of a University course and do NOT include job shadowing, volunteer activities, or SLP-A/ASL hours which you accrued as an employee. **ONLY clinical clock hour logs with the appropriate university supervisor’s signature will be accepted.**

|  |  |  |  |
| --- | --- | --- | --- |
| Hours Accrued |  | Hours Accrued |  |
| Supervisor |  | Supervisor |  |
| Site |  | Site |  |
| Contact Email |  | Contact Email |  |
| CCC # |  | CCC # |  |
| License # |  | License # |  |

|  |  |
| --- | --- |
|  |  |

If additional hours beyond those logged above are submitted with your email, check here

## Coursework Completed

Provide the course number, grade, and credit hours for each course completed. If you have not taken a course but plan to do so prior to attending ENMU, please write the semester and year you will complete the course in the “Grade” column. Courses MUST be verified by a transcript. **DO NOT LIST COURSES MORE THAN ONCE.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Communication Disorders Courses** | Course # | Credit Hours | Grade | **Related Coursework** | Course # | Credit Hours | Grade |
| Introduction to CDIS |  |  |  | Chemistry |  |  |  |
| Anatomy-Physiology of Sp-Lang  Anatomy-Physiology of Hearing |  |  |  | Physics |  |  |  |
| Neuroanatomy-Neurology |  |  |  | Statistics |  |  |  |
| Basic Audiology |  |  |  | General Biology |  |  |  |
| Aural Rehabilitation |  |  |  | Human Anatomy |  |  |  |
| Phonetics |  |  |  | Sociology |  |  |  |
| Articulation Disorders |  |  |  | Disability Studies |  |  |  |
| Speech Science |  |  |  | General Psychology |  |  |  |
| Language Development |  |  |  | Lifespan Psychology  Developmental Psychology |  |  |  |
| Language Disorders |  |  |  | Psychology of Adjustment |  |  |  |
| Language Science/Linguistics |  |  |  | Psychology of Learning |  |  |  |
| Speech/Language Assessment |  |  |  | Cognitive Psychology |  |  |  |
| Preclinical/Clinical Methods |  |  |  | Applied Behavior Analysis |  |  |  |
| Clinical Apprenticeship |  |  |  | Experimental Statistics  Experimental Psychology |  |  |  |
| Clinical Practicum in SLP |  |  |  | Instructional Strategies |  |  |  |
| Clinical Practicum in Audiology |  |  |  | Special Education |  |  |  |
| Medical Aspects of CDIS |  |  |  | Deaf Studies |  |  |  |
| Research Methods in CDIS |  |  |  | Counseling |  |  |  |
| Experiments or Other Applied Research Problems in CDIS |  |  |  | Literacy |  |  |  |

**Other Relevant Coursework**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
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## GPA

Is your GPA reflective of your academic abilities? If not, please provide an explanation (500 character limit).

## Research Experience

**To obtain credit for this experience, you MUST scan and email a conference program verifying your presentation or a signed letter from your research supervisor verifying your paper/participation.**

|  |  |  |  |
| --- | --- | --- | --- |
| Title of Study |  |  |  |
| Supervisor |  |  |  |
| University/Site |  |  |  |
| Contact Email |  |  |  |
| Date of Presentation |  |  |  |
| Presentation Locale |  |  |  |
| Date of Publication |  |  |  |
| Title of Journal |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student Role | Assistant |  | Team Member |  | Independent Researcher |

## Language Proficiency

Describe your abilities in the following languages. **ANSWER HONESTLY.** You may be required to demonstrate these skills prior to or upon admission. Falsifying information is grounds for dismissal from the program.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No Familiarity | Novice Level | Conversational Level | Professional Level | Interpreter Level |
| English |  |  |  |  |  |
| I can read this language fluently.  I can write this language fluently. | | | | | |
| Spanish |  |  |  |  |  |
| I can read this language fluently.  I can write this language fluently. | | | | | |
| ASL |  |  |  |  |  |
|  | | | | | |
| Other: |  |  |  |  |  |
| I can read this language fluently.  I can write this language fluently. | | | | | |
| Other: |  |  |  |  |  |
| I can read this language fluently.  I can write this language fluently. | | | | | |

## Abilities

Describe your abilities in the following areas. **ANSWER HONESTLY.** You will be expected to perform at the indicated proficiency levels if you are selected. RESPONSES DO NOT AFFECT YOUR ADMISSION.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No Familiarity | Novice | Proficient | Skilled | Expert |
| MS PowerPoint |  |  |  |  |  |
| MS Excel |  |  |  |  |  |
| APA Writing Style |  |  |  |  |  |
| Statistical Software (SPSS, etc.) |  |  |  |  |  |

Additional abilities pertinent to your admission (300 character limit):

## Personal Characteristics

List your 3 greatest weaknesses. **Describe specific strategies for addressing these weaknesses** (200 character limit per line). This is a **scored question** so please do not skip it.

Weakness 1)

Strategy:

Weakness 2)

Strategy:

Weakness 3)

Strategy:

## The following essay question will be scored according to writing proficiency, style, logical thought, critical thinking, problem solving abilities, planning skills, creativity, and your ability to explain and justify your decisions in a clear, concise and cohesive manner. Please use paragraphs as necessary. This response has a 4000 character limit.

## This essay question is a significant portion of your application so it is critical that you take this question and your constructed response seriously.

## Essay Question

After a series of unfortunate events, you find yourself stranded on a deserted island with the following mates:

* A carpenter
* A hunter
* A doctor
* A farmer
* A minister

There is no natural shelter apparent, but the island is not without resources. There is potable water, arable land, edible vegetation, and wild game present, but only enough to support 5 people. You have enough non-perishable food to support a single person for approximately 2 weeks. The closest land mass is 400 miles away and currents are fluctuating. The water is clear and a reef is nearby. Tropical storms hit the island periodically are quite severe near the shore. Several of you have left families behind.

What do you do? Please explain your choices (e.g., If you send for help, whom do you send and why did you choose this person/people? If you do not send for help, what is your plan?).

## Our Policy

It is the policy of the ENMU CDIS Program to provide equal opportunities without regard to gender, race, creed, color, religion, national origin, gender, sexual preference, age, or disability. Students, faculty, staff, and clients of the Communicative Disorders Program are treated equitably and the institution and program comply with all applicable laws, regulations, and executive orders. Students are referred to <http://liberal-arts.enmu.edu/health/cdis/professionalfunctions.shtml> for additional information.

## Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a graduate student at ENMU, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

|  |  |
| --- | --- |
| Name |  |
|  | (Typing your name will serve as an electronic signature) |
| Date |  |

Thank you for completing this application form and for your interest in attending the ENMU CDIS Graduate Program with us.