



Daniel L. Goodwin College of Education

Department of Counselor Education
 5500 North St. Louis Avenue
 Chicago, IL 60625-4699
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**Department of Counselor Education
 Certificate in Couple & Family Counseling
 (Program Code G907)
 Application**

Date_____

I. Applicant Information

Name_____

Last

First

Middle

Mailing Address_____

Street

City, State

Zip

Home Telephone_____ Mobile Telephone_____

Email Address_____

II. Employment

Current Employment_____

Street

City, State

Zip

Work Telephone_____ Work Email _____

Title/Position_____

III. References

List the two persons who will be completing the letters of recommendation: (e.g., employers, professors, and/or supervisors who are familiar with your scholarship and experience):

Name:	Name:
Title:	Title:
Address:	Address:
Telephone:	Telephone:
Email:	Email:
Relationship:	Relationship:

IV. Resume

Attach a resume listing your work and volunteer experiences, beginning with the most recent. Indicate whether the experience was part-time or full-time.

V. Transcripts

Submit official transcripts from all universities and colleges attended

VI. Essay

In order that we may better understand your interest in pursuing the Certificate in Couple & Family Counseling at NEIU, please prepare a 2-3 page essay (typed and double-spaced; include your name and date on each page of your essay) in response to the following questions:

1. What stimulated your interest to pursue a certificate in couples & family counseling?
2. What personal and professional qualities do you have that would make you a good candidate for the couples & Family counseling profession?
3. What are your hopes and concerns about working with couples & families?

Note: Admission to the Certificate in Couple & Family Counseling does not constitute admission to the Department's Clinical Mental Health, Family, Rehabilitation, or School Counseling programs. Students who wish to pursue a master's degree in one of the above counseling programs must make formal application to Graduate Admissions and Records. Students-at-large can enroll only in courses for which they have been authorized by this Department.

The Department of Counselor Education expressly reserves the right to consider candidates for admission based on criteria in addition to the admission application. Specifically, the Department of Counselor Education may deny a student admission based on information that indicates the student lacks professional judgment or has exhibited behavior that calls into question the student's suitability for the Couple and Family Counseling profession. Any student denied admission to the Department of Counselor Education may request review of the determination and will be afforded an opportunity to respond to the information upon which the decision is made.

Please direct any questions regarding your application to Counselor Education, 773-442-5550 or counsedu@neiu.edu.

Submit all application materials to: Graduate Admissions and Records, Northeastern Illinois University, 5500 N. St. Louis Avenue, Chicago, Illinois 60625.

Applicant Signature_____

Date_____

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