

TO: Applicants
Master of Education (MED) Counseling and Master of Science (MS) Counseling

FROM: Counseling Department, Texas A&M University-Commerce

RE: Application Requirements

Thank you for considering an application to the Counseling Program at Texas A&M University-Commerce. Students who apply to the Graduate School at Texas A&M University-Commerce for admission to the master's degree program in Counseling must meet the general Graduate School admissions requirements plus the following departmental requirements:

1. Three (3) professional references from persons who can assess your ability to meet the academic and/or professional qualifications for graduate level coursework. References can include supervisors from employment, college professors, etc., but cannot include family members or personal friends. The form to be used is included below. Your reference may also write a letter of support in addition to the provided reference form, but it is not required.
2. A written statement (maximum of three pages, Times New Roman 12-point font, double-spaced) addressing the following:
 - a. The faculty of the Counseling department expects students to be open to self-exploration and to personal and professional development.
 - b. Explain why these qualities are especially important for counselors-in-training.
 - c. What would you do, if admitted to our program, to facilitate your own openness in these areas?
 - d. Reference your answer(s) to your own specific career goals.
3. Resume – Submit a resume or curriculum vitae (CV) which includes your academic and professional history and achievements.

All materials should be submitted to the Graduate School at Texas A&M University-Commerce. Documents can be emailed to: Dayla.Burgin@tamuc.edu in Graduate Admissions or uploaded in the myLeo admissions portal. Upon receipt of all materials, the Graduate School will forward the applicant's completed file to the Department for Counseling for review. After reviewing the application, the department will contact the applicant if selected to interview for the program. After interviews, the department will make a recommendation to the Graduate School regarding admission to the program.

For additional information, please refer to our [webpage](#).

**Reference for Admission to Master's Program with the Department of Counseling
TO BE COMPLETED BY APPLICANT COMPLETELY**

Name of Applicant: _____ Student ID#: _____

Address: _____ City, ST Zip _____

Please select intended program emphasis:

___ Clinical Mental Health Counseling (60 Hr. program
– for MS, LPC preparation)

___ School Counseling (51 Hr. Program, for MS & Sch
Cert. preparation – TEA requires no less than 2
yrs. teaching experience & additional admission
to Professional Education program)

___ School Counseling (60 Hr. Program, for MS, Sch
Cert. preparation, with LPC preparation – TEA
requires no less than 2 yrs. teaching experience
& additional admission to Professional
Education program)

___ College Student Affairs (30 Hrs. Program –
Non-LPC Program) **MEd Degree ONLY**

I agree that the recommendation I am requesting shall be held in Confidence by officials of Texas A&M
University-Commerce, and I hereby waive any rights to examine it. ___ Yes ___ No

Applicant's Signature _____ Date _____

TO BE COMPLETED BY THE RECOMMENDER

The above named person has applied to a master's program in Counseling at Texas A&M University-Commerce and has asked that you supply the information requested below.

I have known the applicant ___ years in my professional capacity as _____ (professor, supervisor, etc.).

Please rate the applicant on the following:

Qualification	Excellent	Good	Average	Poor	No basis for judgment
Goodwill					
Intellectual capacity					
Initiative					
Dependability					
Willingness to accept feedback					
Oral expression					
Written expression					
Emotional stability					
Adaptability					
Self-confidence					
Ability to work with others					
Open rather than defensive					
Technological competence & computer literacy					

In addition to the above ratings, please provide a statement appraising the applicant's promise of success in a master's program in counseling. Please feel free to add comments to support and/or explain your ratings above. You may use the back of this form if necessary.

Signature _____ Date: _____

Name typed or printed _____ Position _____

Highest degree held _____ Telephone Number _____

Address _____ City, ST Zip _____

Please return this form to: The Graduate School, Texas A&M University-Commerce, P.O. Box 3011, Commerce, Texas 75429-3011
OR Dayla.Burzin@tamuc.edu

