

## Application for current and former\* William James College students

\*Former William James College students may use this application if their last day of enrollment was NOT greater than one year from the date of this application.

If you are applying to the Leadership PsyD or Organizational Psychology MA, DO NOT USE THIS APPLICATION. Please click [HERE](#) for the appropriate application.

Only complete applications that arrive at the Admissions Office on or before the set program deadline will be considered. All required application materials listed below, along with the currently existing student file in the William James College Registrar's Office, will be evaluated in this process.

If applicable, selected applicants will be invited to interview with the Program Chair and/or a designated faculty member. The date and time will be mutually determined.

Admission decisions are communicated through the William James College Admissions Office email. For current students, offers of admission will be contingent upon completing the academic year in good standing.

### Required Materials:

- Completed application form
- Statement of Intent:

**For Clinical Psychology PsyD:** In 700 words or less, tell us why seeking a doctoral degree in clinical psychology – as opposed to or in addition to another degree in a mental health related field (e.g., MA, MSW) – is necessary to achieve your career goals. When writing your essay please refer to any professional or personal experiences that have contributed to this decision and why William James College is well suited to help you achieve these goals.

Optional (additional 250 words): Please address any challenges you have faced in the past that may be perceived as weaknesses in your application materials.

**For Clinical Mental Health Counseling (MA) on-campus and online:** Please provide a 4-6 page narrative that thoroughly includes these items:

- Academic/professional background and career interests
- Strengths and abilities as they relate to the professional training that you seek at William James College and what you will offer to our community
- Tell us how seeking a master's degree in Clinical Mental Health Counseling aligns with your professional goals. What do you envision doing after you obtain this degree?
- How you navigate challenges and overcome obstacles
- Commitments to volunteerism and community service
- Circumstances in your life that reflect your perseverance, flexibility, resolve, and passion within diverse and multicultural contexts. Such dimensions may include age, socioeconomic status, disability, education, ethnicity, gender identity and expression, immigration status, language, nationality, race, sexual orientation, religious/spiritual orientation and veteran/military status.

**For other programs:** One page statement explaining your interest in the program and your plan to utilize the training in your professional life.

- General GRE scores are **not** required. GRE scores are **optional** for 2023 Clinical PsyD program applicants.
- Updated Resume/Curriculum Vitae
- Official William James College transcript (Admissions will request from the Registrar's Office)
- Letters of Recommendation
  - Program-specific requirements:

Clinical PsyD, Clinical Mental Health Counseling MA, School Psychology MA/CAGS, Crisis Response Behavioral Health Certificate: **Three** letters of recommendation from the following sources: One from the current academic

advisor, the second from a William James College faculty member, and the third from a supervisor. Applicants may also elect to submit an optional recommendation from the current program Chair.

Applied Behavior Analysis MA, Applied Behavior Analysis Certificate, Graduate Certificate in School Leadership, and Graduate Certificate in Executive Coaching: **One** recommendation.

Psychology MA, and Bachelor Completion program: **No** recommendations required.

Letters of recommendation must be sent directly to the Admissions Office at [admissions@williamjames.edu](mailto:admissions@williamjames.edu).

If you have questions, please do not hesitate to contact [admissions@williamjames.edu](mailto:admissions@williamjames.edu) or by telephone 617-327-6777 select 4.

**WILLIAM JAMES COLLEGE EMPLOYEES, PLEASE CONTACT THE ADMISSIONS OFFICE FOR SPECIFIC INFORMATION**

**Good Luck!**



**APPLICATION FOR CURRENT AND FORMER WILLIAM JAMES COLLEGE STUDENTS**

I am currently attending/have attended the \_\_\_\_\_ program and seek admission to the \_\_\_\_\_  doctoral,  master,  certificate program for the \_\_\_\_\_ term, year \_\_\_\_\_.

Current Students: My total number of credits taken at William James College thus far is: \_\_\_\_\_. I will be completing this program before enrollment in the above selected program  yes  no

Alumni: I attended William James College from \_\_\_\_\_ to \_\_\_\_\_.

**Personal Data** (please type or print clearly)

<b>Name</b>				
Ms./Mr./Mrs./Dr./etc.	First Name	Middle Initial	Last Name	Former name <small>(which may appear on transcripts)</small>
<b>Present Mailing</b>				
Street			Home Telephone (_____) _____	
City	State	Zip Code	Work Telephone (_____) _____	
Email		Gender Identification		Pronouns
Are you a citizen of the U.S.? <input type="checkbox"/> yes <input type="checkbox"/> no    If no, are you a U.S. Permanent Resident? <input type="checkbox"/> yes <input type="checkbox"/> no				
If no to both of the above, Citizen of _____ Country of birth _____				
VISA type status and expiration date _____				

**Optional Information**

Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino	
Race: <input type="checkbox"/> American/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hawaiian/Pacific Islander <input type="checkbox"/> White	
<input type="checkbox"/> I am a U.S. veteran/currently enrolled (active duty/reserves) in the U.S. Military <input type="checkbox"/> Neither of my parents attended college	

**Academic Data**

Please list in chronological order all colleges and universities that you have attended. *Official transcripts should already be part of your student file in the Registrar's Office.*

College or University	City and State	Major	Dates Attended	Degree and date awarded or anticipated

*(Attach additional listing if necessary)*

## Letters of Recommendation (Please check specific program requirements.)

1) Academic Advisor

Name \_\_\_\_\_ Position/Title \_\_\_\_\_  
Mr./Ms./Mrs./Dr./etc. Last Name First Name

2) William James College faculty

Name \_\_\_\_\_ Position/Title \_\_\_\_\_  
Mr./Ms./Mrs./Dr./etc. Last Name First Name

3) Supervisor

Name \_\_\_\_\_ Position/Title \_\_\_\_\_  
Mr./Ms./Mrs./Dr./etc. Last Name First Name

Work or field site \_\_\_\_\_ Email \_\_\_\_\_

## Additional Information

I am currently/ I have participated in these areas of emphasis and/or concentration/s: \_\_\_\_\_

Please list any professional licenses you hold and/or any professional and student affiliations of which you are a member. \_\_\_\_\_

**Application Checklist:** *All documents must be received before your application will be considered*

- Application Form
- Statement of Intent
- Letter of Recommendation (Academic Advisor) – to be sent directly to the Admissions Office.
- Letter of Recommendation (William James College faculty) – to be sent directly to the Admissions Office.
- Letter of Recommendation (Supervisor) – to be sent directly to the Admissions Office.
- Resume/Curriculum Vitae
- Official William James College transcript (Admissions will request from the Registrar's Office)

If any items are missing, please indicate when they will be submitted. Please verify that your name appears on all submitted materials. All materials must be addressed to William James College, Admissions Office, One Wells Avenue, Newton, MA 02459, or sent electronically to admissions@williamjames.edu. **Only complete and signed applications will be considered.**

*I certify that, to the best of my knowledge, the information furnished in this application is true and complete. I agree that if such information, or any other information upon which my admission is based, is not true or complete, the school may rescind my degree. I further agree that, if admitted, I will abide by the rules and regulations of William James College. I acknowledge that all official materials which are part of this application become property of William James College and will not be forwarded to another institution or returned to me.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date