

CALIFORNIA STATE UNIVERSITY, FRESNO  
DEPARTMENT OF CRIMINOLOGY  
DEPARTMENT OF COUNSELING AND SPECIAL EDUCATION

# APPLICATION

*For*

## CRIMINAL JUSTICE COUNSELING SPECIALIST CERTIFICATE

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Application information is considered **confidential**. Use of this material is restricted to the Department of Criminology and the Counseling Program, MS-MFCC Option, California State University, Fresno. *(Please print or type, and use additional sheets where necessary).*

Name \_\_\_\_\_ ID or SS Number \_\_\_\_\_

Local Address \_\_\_\_\_ Local Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ FAX \_\_\_\_\_ Email \_\_\_\_\_

Permanent Address \_\_\_\_\_ Permanent Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Currently enrolled in the following master's programs:

Criminology       MS Counseling, MFCC Option

Advanced to Candidacy      Date Advanced or expected to Advance: \_\_\_\_\_

Overall Graduate GPA \_\_\_\_\_

Prerequisites Completed: Crim 100 (counseling)  Coun 174 or Psych 174 (criminology)

Date prerequisite completed \_\_\_\_\_ Where completed \_\_\_\_\_

Masters Degree held in \_\_\_\_\_

Institution where obtained \_\_\_\_\_

***Include with this application:*** Transcripts - Three letters of reference - Copy of Approved Advancement to Candidacy Form - Personal essay that includes a statement of the student's values and goals