

Application Procedures and Inventory Listing

Literacy/Reading		
Name:		
Application Deadline:	Fall Semester Spring Semester Summer Session	June 15 November 1 March 15
		een checked on this form and include this inventory Office of Graduate Admission.
Essay responding to ques2 Professional/Academic	sealed envelopes) Num tion on application form References	ber of institutions attended for college or university studies pursued outside the
-		s not your native language or if you have not sh. Score cannot be more than two years old.*
		red only if you need a student visa
Evidence of Maryland certific program applicants.	ication or eligibility for M	aryland certification is required for literacy
*Loyola's institution code is	5370	
Please send all required do	cuments to:	
Gra P.O	ola University Maryland duate Admission Processi . Box 1447 sville, MD 20704	ing Center

Note: No action can be taken on your application for admission until all required materials, fees, and transcripts are received.

On-line applications are available at www.loyola.edu/graduate



Literacy/Reading Education Application for Admission

Start Term:	Spring 20	Summer 2	.0	Fall 20_	
Personal Data					
Legal Name:	DR/MR/MRS/MS/OTHER LAST	ſ	FIRST	MI	JR/III/ETC.
Former Name(s):			Preferred N	ame:	
Permanent Addres	SS:	BER AND STREET			
CITY	STATE		COUNTRY		ZIP/POSTAL CODE
Mailing address:	NUM	BER AND STREET			
CITY	STATE		COUNTRY	ZIP/POSTA	AL CODE
Telephone Home:	AREA CODE/NUM		Mobile:	AREA CODE/NUMBER	
				AREA CODE/NUMBER	
E-mail address:			<u></u>		
SSN:			(Required	if you intend to apply for	federally funded aid)
Demographic I	nformation	Gender: Male	Female		
Date of Birth	Pla	ce of Birth		Citizenship*	·
	MO/DAY/YR				
Are you a perman	ent resident of the Ur	ited States? Yes	No	_ Visa Type	
PASSPORT) OR A COPY O	TSIDE THE UNITED STATES, Y F YOUR RESIDENT ALIEN CAR IS PART OF YOUR APPLICATIO	OU ARE REQUIRED TO PROVIDE D. IF YOU REQUIRE A F-1 VISA, Y N FOR ADMISSION.	PROOF OF CITIZ OU ARE REQUIRI	ENSHIP (COPIES OF A BIRTH C ED TO COMPLETE THE INTERNA	ERTIFICATE OR US ATIONAL STUDENT
Employment					
Present Position:_			Length in P	osition:	
Employer:					
Address:					
CITY	STATE	COUNTRY		ZIP/POSTAL CODE	
Employer Tuition	Reimbursement: Ye	esNo	Percentage	or Amount:	

Educational Background

List ALL colleges/universities attended. You are <u>required</u> to submit official transcripts from each institution.

College/University	Attendance Dates	Degree/Certificate	Completion Date
Student Classification	select one)		
First Time Loyola G Former Loyola Grad	raduate Applicant uate Student Returning to New	Program Re-ap	plicant to Same Program natriculating Applicant
Are you a certified teacher Is this certification	eher? Yes No Provisional	In what state do you hold c	ertification? _Advanced?
	aper, type a concise essay descr aspirations and how Loyola's as		
The follo	wing questions are optional ar	nd are used for statistical pu	rposes only.
Are you of Hispanic or Latino O	rigin?Yes	No	
What is your race? Select one or	more of the following cates	gories:	
American Indian Native Hawaiian	or Alaska Native Blac or Other Pacific Islander	ck or African American Asian White	
Religious Affiliation:			
the best of my knowledge. I have author admission application upon request by I	rized each college or university I ha Loyola University Maryland. I agre	ave attended to release academic e to submit other materials that	naterials are complete, accurate and true to and personal information as related to this are required for this admission application. Ellation of admission or registration or both
Signature		Date	
LOYOLA UNIVERSITY MARYLAND DO RELIGION, AND DISABILITY IN THE AI ADMISSION AND EMPLOYMENT. THE AMENDMENT(S) OF 1972, AS AMENDED ASSISTANT VICE PRESIDENT FOR HUN UNDER FEDERAL LAW TO ENROLL NO	OMINISTRATION OF ANY OF ITS E DESIGNATED COMPLIANCE OFFIO D, AND WITH SECTION 504 OF THI MAN RESOURCES, YORK ROAD, R.	EDUCATIONAL PROGRAMS AN CER TO ENSURE COMPLIANCE E REHABILITATION ACT OF 197 M. 206, 410-617-2354. LOYOLA U	D ACTIVITIES OR WITH RESPECT TO WITH TITLE IX OF THE EDUCATION

^{*} All application materials, once submitted, become the property of Loyola University Maryland and cannot be returned.



Graduate Programs Transcript Request

To the Applicant: Send this form to each institution you attended. Many institutions charge a fee for official transcripts. To avoid delays, check each institution's policy in advance.

Name:				
LAST	FIRST		MIDDLE	
Mailing Address:				
Mailing Address:	NUMBER AND STREET			
CITY	STATE	COUNTRY	ZIP/POSTAL CODE	
Name of institution attended	l:			_
Date of enrollment: From		To		
Date of emonment. From	MONTH/YEAR	MONTH/	YEAR	
Former and/or other name(s) while attending this insti	tution:		
I hereby authorize the releas	se of my transcript to Loyo	ola University Mary	land.	
Signature		Date		

To the Registrar: The person submitting this form is applying to the Graduate Programs at Loyola University Maryland. The Office of Graduate Admission at Loyola requests that you attach a copy of the applicant's official academic record to this form and insert the materials into the envelope provided by the student or an envelope used for official correspondence. Seal the envelope and **sign across the flap** to ensure confidentiality. Thank you for your assistance. Return the sealed envelope to the applicant or mail directly to the **Loyola University Maryland, Graduate Admission Processing Center, P.O. Box 1447, Beltsville, MD 20704.**



Graduate Programs in Education

Application for Admission: Part 2 Program Selection Form

Name
1. Program Selection
(Select one option)
Literacy
Master of Education - Reading Specialist
Master of Education – Literacy Teacher
Post-master's Certificate of Advanced Study in Education
Select one Option: Reading Specialist
Reading Teacher



Recommendation Form: Literacy

To the Applicant

your application, you may	y wish to include a pre-ad	ddressed, stamped envelope: T	his form is only required for	Literacy applicants.
Applicant's Name:				
	LAST	FIRST		MIDDLE
Mailing Address:				
rating radiess	NUMBER AND STRE	ET		
CITY AND COUNTY		STATE AND COUNTRY	ZIP/POSTAL CODI	E
	for admission. I further	its agents and employees from release from liability all partie on.		
Applicant's Signature:_			Date:	
Committee finds candid evaluation. Notice about confidentiality: to their records unless and university will use this form on the applicant's behalf, wi	applying for admission to the luations helpful in choosing the Under Public Law 93-380 antil they enroll at Loyola Unfor the purpose of admissional before his/h	the Graduate Program in Literacy English from among highly qualified canding the Family Educational Rights and Iniversity Maryland. To ensure control on only. The professional reference or matriculation at Loyola. Your decision in his/her best interest.	didates. nd Privacy Act, applicants for adn nfidentiality of information within e, and any other subjective supple	nission do not have access the spirit of the law, the mentary statements sent
Sign your name across the	sealed flap of the envelope	place the form and any additional and return it to: Loyola Univer email to graddocs@loyola.e	sity Maryland, Graduate Ad	
Name:				
Title/Position:				
Company/Position:				
Address:				
	AND STREET			
CITY	STATE	COUNTRY	ZIP/POSTAL CODE	

Telephone: E-mail:

Complete the following items and forward this form to the individual who will provide your reference. To expedite the processing of

Background Information

Professional Relationship with Applicant: How	w long have you known this ap	oplicant?	
Dates: fromto	Length of time		
Student under my supervision	Teacher under	r my supervision	
Employee under my supervision	Other		
If applicant is a former employee, please state h	nis/her reason for leaving:		
Evaluation			
Please comment on whatever you think is impo characteristics.	rtant about the applicant, inclu	ding a description of professional, academic and	or persona
			_
Ratings: Reading Specialist/Teacher Qualifi	ication Characteristics		
Shows strong evidence of leadership skills:		N. D	
Almost Always Most of the time	·	No Basis	
Demonstrates a sense of humor and flexibilit	-		
Almost Always Most of the time		No Basis	
Is competent and could implement new appr			
Almost Always Most of the time S		No Basis	
Exhibits maturity in working with students,	_		
Almost Always Most of the time	Sometimes Rarely	No Basis	
Is conscientious and dependable:			
Almost Always Most of the time	Sometimes Rarely	No Basis	
Demonstrates mature judgment and a high d	legree of professionalism:		
Almost Always Most of the time	Sometimes Rarely	No Basis	
Organizes plans for implementing profession	nal goals on both long range a	and a daily basis:	
Almost Always Most of the time S	Sometimes Rarely	No Basis	
Shows evidence of a willingness to continue t	heir professional growth:		
Almost Always Most of the time	Sometimes Rarely	No Basis	
Communicates clearly and effectively both or	rally and in writing:		
Almost Always Most of the time	Sometimes Rarely	No Basis	
How would you evaluate this person as a prosper	ective reading specialist/teache	er?	
A most desirable future professional reading	g specialist/teacher		
A desirable future professional reading spec	cialist/teacher		
An acceptable future professional reading sp	pecialist/teacher		
Not desired as a future professional reading	specialist/teacher		
Signature:		Date	