

**SUPPLEMENTAL APPLICATION**  
**Psychology Department**  
 Virginia State University

Please fill out both pages of this form. Include one copy with your graduate school application and return a second copy to

Department of Psychology  
 Attn: Dr. Katrina L. Walker  
 Virginia State University  
 1 Hayden Drive, Box 9079  
 Petersburg, VA 23806

Admission to a graduate program in the Psychology Department at Virginia State University is contingent upon meeting all requirements of the Graduate School and upon being recommended by the Graduate Admissions Committee of the Psychology Department.

**Applicant's Name:** \_\_\_\_\_

Home Address:

\_\_\_\_\_

Street	Town or City	State	Zip Code
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Current Mailing Address (if different from Home Address);

\_\_\_\_\_

Street	Town or City	State	Zip Code
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E-Mail Address:

Home Telephone Number \_\_\_\_\_ Current Telephone Number (if different from Home Telephone Number) \_\_\_\_\_

Please indicate (in order of preference) those programs for which you wish to be considered:

<p><u>MASTER'S</u></p> <p>CLINICAL: _____</p> <p>GENERAL: _____</p>	<p><u>PHD</u></p> <p>CLINICAL HEALTH: _____</p> <p>BEHAVIORAL &amp; COMMUNITY HEALTH SCIENCES: _____</p>
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NOTE: The PhD programs request an on-site interview of the final candidates for admission.

In which state are you claiming residency? \_\_\_\_\_

College graduated or expect to graduate from: \_\_\_\_\_

Date \_\_\_\_\_ Undergraduate Major \_\_\_\_\_ Minor \_\_\_\_\_

Master's degree received or expected to receive from: \_\_\_\_\_

Date \_\_\_\_\_ Major \_\_\_\_\_ Minor \_\_\_\_\_

Computed GPA on a 4-point scale (A – 4; B – 3; C – 2; D – 1; F – 0)

Cumulative \_\_\_\_\_; Junior & Senior years \_\_\_\_\_; Psychology courses \_\_\_\_\_

The following courses (or their equivalents) are strongly recommended. One course from each category is required of students entering a graduate program in Psychology. Please indicate the course number and title, semester taken, grade and university attended for each course. If you are currently enrolled in the course, please note this information.

Course	Course Number and Title	Semester Taken	Grade	University
A. Introductory Psychology				
B. Statistics or				
Experimental Psychology or				
Research Methods				
C. Social Psychology or				
Personality Theory or				
Cognitive Psychology or				
Developmental Psychology				
D. Physiological Psychology				
E. Abnormal Psychology*				

\* Required for Clinical & Clinical/Health Psychology only.

Current GRE Scores (**Required for completed application – your application will NOT be reviewed without GRE scores**):

Verbal \_\_\_\_\_; Quantitative \_\_\_\_\_

I have not yet taken the GRE \_\_\_\_\_; Date scheduled to take \_\_\_\_\_; I have taken the GRE but have not received the results \_\_\_\_\_

Are you interested in a graduate assistantship? Yes ( ) No ( )

If an assistantship is not available (check one): \_\_\_\_\_ I do not want to be considered for admission; \_\_\_\_\_ I can attend but must obtain outside financial support; \_\_\_\_\_ I can attend without financial assistance.

Please list and describe any psychological research in which you have been involved.

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Visit the Psychology Department's faculty webpage's to review faculty research interests. List your research interests and potential faculty research mentors.

Research interests

Potential faculty mentor

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Please list and describe any teaching or psychology related practical experience you have had.

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Please attach a one-page (approximately 500 words), typed personal statement describing your research interests and academic and career goals in psychology.

Please attach a resume or curriculum vitae.

Please submit three letters of recommendation in signed, sealed envelopes. The letters should address your academic performance, character, and potential as a PhD candidate.

**PhD program applications due January 15<sup>th</sup>; Master's program applications due April 1<sup>st</sup>**

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Signature

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Date