



M.A. in Psychology Depth Psychology Program

1801 E. Cotati Ave.
Rohnert Park, CA 94928
707 664.2682

*Application for Admission to Sonoma State University Graduate
Studies through Extended Education Special Sessions*

Email: psychma@sonoma.edu www.sonoma.edu/psychology/depth

Application Instructions

To apply to the Depth Psychology Program:

- A. Request one official copy of your transcript(s) to be sent directly from your former college(s) or university/universities to:

Office of Admissions and Records
Sonoma State University
1801 E. Cotati Avenue
Rohnert Park, CA 94928-3609

- B. Send one unofficial copy of your transcript(s) to:

Graduate Administrative Specialist
Sonoma State University
Department of Psychology: Stevenson 3092
1801 E. Cotati Avenue
Rohnert Park, CA 94928-3609

NOTE: Every college or university listed on your application will require a transcript. Request official transcripts as soon as possible—they can take 3-8 weeks to arrive. Unofficial transcripts can often be obtained via internet.

- C. Complete the following:

- 1) Admission Application forms.
- 2) Four-page written statement reflecting on your life, symbolic work, and reasons for enrolling in the program.
- 3) Three recommendation letters from professors, supervisors, employers, or colleagues. Use the forms provided in this packet. Recommendation letters may be mailed or faxed to the department.
- 4) Attach a check for the \$55 application fee made out to Sonoma State University.
- 5) Mail to:

Graduate Administrative Specialist
Sonoma State University
Department of Psychology: Stevenson 3092
1801 E. Cotati Avenue
Rohnert Park, CA 94928-3609
Fax (707) 664.3113



M.A. in Psychology Depth Psychology Program

1801 E. Cotati Ave.
Rohnert Park, CA 94928

Application for Admission

Attach \$55 (U.S.) application fee made payable to Sonoma State University. The fee is non-refundable and may not be transferred to another term. Please print responses in blue or black ink. Response to each item is mandatory unless otherwise indicated.

For Office Use Only	
Rec:	<input type="text"/>
Date:	<input type="text"/>
Fee Status:	<input type="text"/>
By:	_____

- 1. Please indicate year for which you are applying:** Fall Semester 200_____
- 2. Social Security Number** _____

Use of Social Security Number—Sonoma State University uses the social security number as the identifier for student records maintained in your association with the campus and, if needed, to help collect debts owed to the university. Applicants are required to include their social security number in designated places on applications for admission pursuant to authority contained in Title 5, California Code of Regulations, Section 41201.

If you do not have a social security number at the time you file the application, leave the item blank; the campus will assign a substitute number.

- 3. If you have previously applied to or attended this campus, please list:**

Date of application Term _____ Year _____ Last term attended Term _____ Year _____

Previous student file no. _____ (If different than SSN)

- 4. Legal name** _____
Last Name First Name Middle

- 5. Other name(s)** that may appear on your academic records

Last Name First Name Middle

- 6a. Current mailing address**

Address Apartment

City State Zip Code

Continued on next page

6b. Permanent address if different from current address

Address		Apartment
City	State	Zip Code

7a. Home Telephone _____ 7b. Work _____
 (Area Code) Number (Area Code) Number

8. Birth Date _____ 9. Sex (enter M or F)
 Month Day Year

10. Name of intended major Psychology Major code **20011**
 Emphasis (if any) Depth Psychology

11. What is your degree objective? Enter code in box. 5- MA 5

12. What was your baccalaureate major? _____

13. Are you eligible to re-enroll at all institutions previously attended?
 If not, attach an explanation and name any institution you are ineligible to re-enter.
 Yes No

14. **Print the names and locations of all colleges and universities attended, even if no coursework was completed.** Begin with the last institution attended. Attach a separate sheet if you need more space. For units in progress and planned, see item 15.

All Institutions	Enrolled				Number of transferable units completed		Degree Received	Date (to be) received		Fee Status	For office use only
	From		To		Sem.	Quart.		Mo.	Yr.		
	Mo.	Yr.	Mo.	Yr.							

Please send ONE OFFICIAL TRANSCRIPT showing the most recent 60 semester units you have attempted, as well as award of the bachelor's degree (including summer and Extension transcripts) to SSU Admissions & Records, 1801 E. Cotati Ave., Rohnert Park, CA 94928.

Continued on next page

15. List below college courses in which you are currently enrolled and additional courses you plan to complete (including summer school) before entering the program. Attach a separate sheet if more space is needed.

Courses in Progress				Courses Planned			
Institution	Term/Year	Dept. Course # and Title	Unit Value	Institution	Term/Year	Dept. Course # and Title	Unit Value
Total Units in Progress				Total Units Planned			

16. Employment History. You may omit employment not relevant to your professional (academic) goal. Indicate present employer, if now employed. (Include nature of work, and dates)

Dates	Employer	Job Title

17. If you expect to be employed while enrolled, indicate whether employment will be full-time or part-time by checking the appropriate box:

Full-time Part-time Approx.
Hrs/wk

18. Financial Status: Indicate anticipated sources of financial support while enrolled in the program: (Check all that apply)

I will not require financial assistance of any kind I will receive full subsidy from my employer

I will receive partial subsidy from my employer

I will (or expect to) receive financial assistance in the form of: _____

If you wish to apply for financial assistance, contact the Financial Aid Office at 707-664-2389 for an application form or check the Financial Aid Website: www.sonoma.edu/finaid

19. Permanent residence.

If you live in California, list county of residence _____

If you live outside of California, list other state or county _____

Continued on next page

20. Country of citizenship (all must answer) _____

Enter your citizenship code in box.

Y- U.S. Citizen

R- Refugee

F-Visa

J- J visa

I-Immigrant I-551 ("green card") Date issued: _____

(You must provide the date issued and be prepared to verify.)

O-Other Visa (specify): _____ Date issued: _____ **N**-None of the above

21. Enter your ethnic identity code in box (optional).

1- American Indian or Alaskan native; tribe _____

2- Black, non-Hispanic, including African-American **J**- Japanese **G**- Guamanian

3- Mexican-American, Mexican, Chicano **K**- Korean **H**- Hawaiian

A- Central American **R**- Asian Indian **N**- Samoan

B- South American **5**- Other Asian **6**- Other Pacific/Isl.

Q- Cuban **M**- Cambodian **7**- White

P- Puerto Rican **L**- Laotian **F**- Filipino

4- Other Latino, Spanish-origin, Hispanic **V**- Vietnamese **8**- Other

C- Chinese **T**- Thai **9**- No Response

S- Other Southeast Asian **D**- Decline to state

22. If you have been on active duty in the U.S. military services, enter a Y in box.

Attach a copy of DD214 or DD295 for evaluation of credit.

23. If you have a physical, perceptual, psychological or learning disability, enter a Y in the box (**optional**).

Special services may be available to accommodate your disability.

24. High School attended _____

City and State _____

Graduation or GED date _____

Month/Year

25. Certification—to be read and signed by all applicants to certify the accuracy of the information provided.

I certify under penalty of perjury, or after first being duly sworn, that I have provided complete and accurate responses to the items on this application. I further certify (swear) all official documents submitted in support of this application are authentic and unaltered records that pertain to me. I authorize release of any information submitted by me in connection with my application to any person, firm, corporation, association or government agency, but only to verify or explain the information, obtain pertinent records, or in connection with perjury proceedings. My signature certifies the accuracy and completeness of the information provided. I understand that any misrepresentation may be cause for denial or cancellation of admission.

Applicant's signature _____ **Date** _____

Email address _____

For office use only:

Accom. Status

Enroll. Status

Res. Status

Country of Citizenship

Perm. Res. _____

CC. Trans. _____

Degree held

Inst. of origin _____

Trans. units In Prog. ____.

Miscellaneous:



M.A. in Psychology

Depth Psychology Program

Application for Admission

Name _____ Date _____

Address _____

Email _____ Phone _____

Admission Requirements

1. B.A. or B.S. from an accredited institution.
2. Minimum GPA of 3.0 in the last 60 units of coursework.
3. Competency in written and oral expression, as evidenced in the coherence of the personal statement and the oral interview.
4. Emotional maturity, as evidenced in the personal statement, life experiences, and oral interview.
5. Readiness for graduate work, as evidenced in the three letters of recommendation and oral interview.
6. Completion of specified prerequisite coursework in psychology, or approved competency equivalents, before the start of graduate classes in late August.
7. Reflective experience in symbolic process.

Admission Application

1. One official transcript mailed to Admission & Records from _____.
2. All unofficial transcripts are attached.
3. GPA for the last 60 units of coursework _____ Overall GPA _____.
4. Prerequisites:

Prerequisite	Course or Equivalent	Institution	Date Completed
Child Development			
Adult Development			
Personality			
Abnormal Psychology			
Research Methods			

5. Symbolic reflection: Briefly describe the nature of your symbolic work (e.g., dreamwork, art process, poetry, personal reflection, workshop, coursework).

6. Three letters of recommendation (use forms provided):

Name _____ Title _____ Phone _____

Name _____ Title _____ Phone _____

Name _____ Title _____ Phone _____

7. Written Statement (4 double-spaced typed pages)

The Depth Psychology Program emphasizes intellectual as well as experiential learning. In order to get an idea of the kind of person you are, we ask that you submit a four-page reflective essay on your life, a description of the type of symbolic work you've engaged in thus far, and your reasons for desiring to enroll in this program. You may use the following suggestions as a guideline:

Life Reflection. Describe your life experience in a way that depicts significant experiences or people in your life, your values and life philosophy, your work and learning, the current direction of your interests, and your strengths and weaknesses.

Symbolic work. Describe the type of symbolic work you've engaged in and its meaning for you. This might include work with dreams, images, art, dance, theater, or poetry.

Statement of purpose. Describe your reasons for desiring to enroll in this program. You may discuss relevant background skills, interdisciplinary interests, short-term or long-term goals, ideas for the Master's thesis, or possible future direction of your work.

7. Three letters of recommendation.

Submit three letters of recommendation on the forms provided from a professor, supervisor, employer, or colleague who knows you and your work.

Return all completed application materials with a \$55 application fee to:

**Graduate Administrative Specialist
Sonoma State University
Department of Psychology: Stevenson 3092
1801 East Cotati Avenue
Rohnert Park, CA 94928-3609**

Fax (707) 664-3113

**Sonoma State University
M.A. in Psychology, Depth Psychology Program
Letter of Recommendation**

Applicant Name: _____ Date: _____

Your carefully considered evaluation of this applicant will greatly aid in the selection of those best qualified for admission. Graduates of our program practice professionally in education, non-profit agencies, and businesses with skills in teaching, group facilitation, arts expression, personal growth enhancement, and cross-cultural awareness; as well as go on to pursue clinical training and doctoral degrees, and research and write in the field of depth psychology.

Since the applicant's file cannot be reviewed until it is complete, your prompt return of this form is appreciated.

State regulations require that all files, including letters of recommendation, be available to students, unless the student waives the right to see your letter.

Waiver of Rights of Access

For the sake of confidentiality, we suggest that the applicant sign this waiver.
I waive the right of access to this letter of recommendation that I have under the Family Educational Rights and Privacy Act of 1974.

Applicant Name: _____ Date: _____

Signature: _____

In what capacity do you know the applicant? _____

How long have you known the applicant? _____

How well do you feel that you know the applicant? _____

Name of Recommender: _____ Signature: _____

Position, Institution: _____

Address: _____

Work Phone: _____ E-mail: _____

Return completed recommendation to:

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Sonoma State University
Department of Psychology: Stevenson 3092
1801 East Cotati Avenue
Rohnert Park, CA 94928-3609**

Fax (707) 664-3113

Responses to the following questions may be included on a separate sheet or in letter format.

1. Please evaluate the applicant's intellectual or academic capacity (intelligence, curiosity, ability to grasp ideas and communicate clearly, open-mindedness, creativity, promise of intellectual growth).

2. Please evaluate the applicant's interpersonal sensitivity (personal warmth, listening skills, empathy, team-building skills, consultation skills) and emotional maturity. How does the applicant interact in a group? How does the applicant interact with others and handle difficulties? How does the applicant express feeling states and values? What is the degree of the applicant's psychological insight?

3. Please give us your overall estimate of the applicant as a potential graduate student and professional. Are there situational factors that need to be considered in accepting the applicant? Are there special indicators (such as motivation, integrity, stability) that the applicant should or should not be accepted?

4. Please rate this student in terms of overall promise.

Below Average	Average	Somewhat Above	Good	Unusual	Outstanding	Truly Exceptional	No Opinion
Low 40%	Mid 20%	Next 15%	Next High 15%		Highest 10%		

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Applicant Name: _____ Date: _____

Signature: _____

In what capacity do you know the applicant? _____

How long have you known the applicant? _____

How well do you feel that you know the applicant? _____

Name of Recommender: _____ Signature: _____

Position, Institution: _____

Address: _____

Work Phone: _____ E-mail: _____

Return completed recommendation to:

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4. Please rate this student in terms of overall promise.

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Signature: _____

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How long have you known the applicant? _____

How well do you feel that you know the applicant? _____

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Position, Institution: _____

Address: _____

Work Phone: _____ E-mail: _____

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