APPLICATION DEADLINE

The Psy.D. program at Chestnut Hill College accepts applicants for the fall semester only. The program accepts applicants to Year I on a rolling admissions basis until the entering class is filled. Application by January 15th is encouraged. The application deadline for Year II is January 15th. All applicants whose applications are completed by January 15th will be notified of their status by April 15th. Incomplete application packets cannot be considered. It is recommended that the applicant submit all materials except for the test scores as a complete packet. If that is not possible, the application form with fee must accompany the first materials submitted.

REQUIRED APPLICATION MATERIALS

• APPLICATION FORM WITH $80* NON-REFUNDABLE APPLICATION FEE
  A resume or curriculum vitae may be included with the application.
  *Subject to change; check website for current amount

• TRANSCRIPTS OF ALL PREVIOUS GRADUATE AND UNDERGRADUATE COLLEGE COURSEWORK
  Official transcripts should be sent to the applicant in a sealed envelope with the registrar's name signed across the seal. Do not open the official transcript envelopes. If the seal has been broken, the transcript is no longer official and will not be accepted as part of the application packet.

• STANDARDIZED TEST SCORES
  Applicants with bachelor's degrees must submit GRE General Test scores.
  Applicants with master's degrees may submit either GRE General Test scores or MAT scores.
  Test scores should be sent directly to Chestnut Hill College from the testing agency. Tests must have been taken within five years of the date of application.

• THREE LETTERS OF RECOMMENDATION
  Letters of recommendation should be from faculty members and/or clinical supervisors who are familiar with the applicant's skills and potential. At least one letter should pertain to the applicant's clinical performance and/or potential, and at least one letter must pertain to the applicant's academic performance and potential. For applicants seeking advanced standing, one of the letters of recommendation must be an evaluation from a practicum supervisor or supervisor at a work placement in a mental health setting. Complete and sign the top portion of the recommendation form before forwarding it to the individual who will provide your reference. Ask that the letter be returned to you in a sealed envelope. The person completing the recommendation should sign over the seal of the envelope flap. Do not open the sealed envelope when it has been returned to you.

• PERSONAL ESSAY
  Please Note: Essays will be evaluated both for content and for writing style. In an essay of approximately 1200 words (5 double-spaced pages), please address each of the following topics:
  1. What unique qualifications do you believe make you suited to a career in professional psychology?
  2. How does the Psy.D. Program at Chestnut Hill College fit with your professional goals? Please be as specific as possible.
  3. One of the objectives of the Psy.D. Program is to foster "an understanding and appreciation of cultural factors relevant to the delivery of psychological services to a diverse client population." Please discuss your background and interest in the topics of diversity and serving diverse populations, specifically addressing how you can contribute to the Psy.D. Program's commitment to training students who will be competent to provide services to an increasingly diverse population of potential clients.
  (The Program adopts APA's definition of "diversity," which includes but is not limited to the following characteristics: age, disabilities, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socio-economic status.)
• **TOEFL, TSE (TEST OF SPOKEN ENGLISH), AND TWE (TEST OF WRITTEN ENGLISH)**

Tests are required of all applicants for whom English is not the first language.

• **PERSONAL INTERVIEW**

A personal interview with members of the faculty is required. Invitation to the personal interview is extended to selected applicants after review of the submitted materials. At the interview, applicants will be required to disclose any past criminal history. In some cases, an applicant may be required to undergo a criminal background check.

• **TRANSFER CREDITS**

A catalog course description and syllabus is required for any course for which the applicant wishes to request transfer credits. These materials must be submitted with the application if the applicant wishes to be considered for admission directly to Year II. Syllabi and course descriptions are not necessary for graduate courses completed at Chestnut Hill College.

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**ALL APPLICATION MATERIALS SHOULD BE ADDRESSED TO:**

Director of Admissions  
School of Graduate Studies  
Chestnut Hill College  
9601 Germantown Avenue  
Philadelphia, PA 19118-2693

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For more information, please contact:

*E-mail: gradadmissions@chc.edu  
Phone: 215-248-7193*

or

The Director of Graduate Admissions,  
Jayne Mashett  
*E-mail: mashettj@chc.edu  
Phone: 215-248-7020*
APPLICATION FOR ADMISSION
DOCTOR OF PSYCHOLOGY (PSY.D.)

ID # ___________________________ DATE RECEIVED ________________________

APPLICANT INFORMATION (Please type or print)

NAME ________________________________________________________________________________________________________________________________

OTHER NAME(S) UNDER WHICH TRANSCRIPTS MAY BE ISSUED_ ____________________________________________________________________________

ADDRESS ______________________________________________________________________________________________________________________________

HOME PHONE ___________________________ CELL PHONE _____________________________

E-MAIL ADDRESS __________________________________________________________________ COUNTRY OF CITIZENSHIP, ____________________________

COUNTRY OF RESIDENCE ___________________________ SOCIAL SECURITY ______________________

PLACE OF BIRTH ___________________________ DATE OF BIRTH ___________________________

MARITAL STATUS ___________________________ RELIGIOUS AFFILIATION ______________________

GENDER ___________________________

☐ Check here if you have a master's degree in clinical and/or counseling psychology or a closely related field and you are requesting to be admitted directly to Year II of the doctoral program. You must submit course descriptions and syllabi for all courses for which transfer credit is being requested.

Chestnut Hill College is required by the Federal Government to ask the following questions about your race/ethnicity. Your responses enable us to do research as well as qualify for grants and develop programs that will benefit our students. Respectfully, we ask that you please respond to both of the following questions as accurately as you can.

Please check one or more of the following:

☐ HISPANIC OR LATINO OR OF SPANISH ORIGIN  ☐ CUBAN  ☐ PUERTO RICAN

☐ SOUTH AMERICAN  ☐ CENTRAL AMERICAN  ☐ NONE OF THESE

Please check one or more of the following:

☐ AMERICAN INDIAN OR ALASKA NATIVE  ☐ ASIAN  ☐ BLACK OR AFRICAN AMERICAN

☐ NATIVE HAWAIIAN OR PACIFIC ISLANDER  ☐ WHITE

PREFERRED CONCENTRATION (Please check one)

☐ MARRIAGE AND FAMILY THERAPY CONCENTRATION  ☐ PSYCHOLOGICAL ASSESSMENT CONCENTRATION

☐ GENERALIST (NO CONCENTRATION DECLARED)

EMERGENCY CONTACT

NAME ___________________________ RELATIONSHIP TO YOU __________________________

PHONE ___________________________
## EDUCATIONAL INFORMATION

### GRADUATE

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GRADUATE PRACTICUM AND INTERNSHIP EXPERIENCE

INSTITUTION__________________________   CITY/STATE______________________
DATES ATTENDED_____________________   GPA______________________________
SUPERVISOR'S NAME AND CREDENTIALS__________________________________________________________________________________

INSTITUTION__________________________   CITY/STATE______________________
DATES ATTENDED_____________________   GPA______________________________
SUPERVISOR'S NAME AND CREDENTIALS__________________________________________________________________________________

PROFESSIONAL EXPERIENCE

Please list all relevant experience, including full and part-time work, beginning with the most recent. Include additional pages or attach a resume or curriculum vitae if desired.

PRESENT EMPLOYER_____________________   WORK PHONE______________________
POSITION/TITLE_______________________   DATE STARTED____________________
PLACE OF EMPLOYMENT________________
POSITION/TITLE_______________________   DATES___________________________
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POSITION/TITLE_______________________   DATES___________________________

HOW DID YOU HEAR ABOUT THE PSY.D. PROGRAM AT CHESTNUT HILL COLLEGE?
________________________________________________________________________

NONDISCRIMINATION POLICY

The Department of Professional Psychology subscribes to and practices a policy of nondiscrimination in admissions, enrollment, and employment. This policy prohibits discrimination on the basis of religion, age, race, color, national or ethnic origin, sex, sexual orientation, disability or marital status.

I certify that the information submitted on this application is complete and accurate. I understand that withholding information or the submission of false information will make me ineligible for admission to the College or subject to dismissal. I understand that from the time I file my application it is my responsibility to be familiar with all policies and procedures in the School of Graduate Studies Catalog.

SIGNATURE OF APPLICANT_________________________________________________ DATE____________________