

APPLICATION PROCEDURES

Certification Only—Educational Administration PreK-12

The application process is a two-part procedure. Those applying for admission to the Department of Educational Administration for admission to preparation programs must first submit the following items to:

1. Office of Graduate Studies <http://www.unl.edu/gradstud>
University of Nebraska-Lincoln
1100 Seaton Hall
P.O. Box 880619
Lincoln NE 68588-0619
(402) 472-2878 OR 800-742-8800
 - A. UNL Graduate Studies application form
 - B. Application fee
 - C. Two official copies of college/university transcripts
 - D. Official TOEFL score (international students only; minimum score of 550, not more than two years old)

Important Information for “Certification Only” Students:

*When applying online to the Office of Graduate Studies, persons who hold a Masters degree and wish to apply for certification as a school principal, special education director, or superintendent, must apply as **Non-Degree, Post-Baccalaureate** student in Part III. Additionally, there is a question below that asks if students will be working toward a certificate. Applicants should check **“yes”** and put **Educational Administration** as the program.*

2. Graduate Secretary Dept of Educational Administration
141 Teachers College Hall
Lincoln NE 68588-0360
(402) 472-3729
 - A. Department program application form
 - B. Letter of application
 - C. Personal vitae/resume
 - D. Three letters of recommendation in support of your application

Only completed applications will be considered by the Admissions Committee. Department applications must be completed within one year of initiation. All incomplete files will be destroyed. For more information about application procedures, please review the Admissions Guidelines in the Graduate Studies Bulletin on pages 7 and 9 or contact the Graduate Committee Secretary.

A student must be admitted to a Department program, be assigned an adviser and have an official program of studies filed before he/she has fewer than 18 hours remaining on either a Masters Degree or a Certificate of Specialization program.

Certification Program Department Admissions Materials

Once application to the Office of Graduate Studies is completed, you can turn your attention to preparing the materials that will be submitted directly to the Department of Educational Administration. The forms you will need are included in this packet.

- 1.) **TITLE PAGE** A page containing your name, address, and home telephone number; your employment institution name and your position title, address, telephone and fax number and your e-mail address if you have one at this site.
- 2.) **DEPARTMENT MASTERS APPLICATION FORM**
Can be found in the packet.
- 3.) **LETTER OF APPLICATION** Address the letter to the Graduate Committee Chair. This letter is usually just two or three paragraphs stating that you are making formal application for admission to the Masters Program and wish to submit the enclosed materials for consideration.
- 4.) **PERSONAL VITAE/RESUME** This will expand upon the information asked for in the application form, and will give you an opportunity to highlight specific accomplishments and experiences. Your vita will present the committee with its first overview of your experience and accomplishments.
- 5.) **LETTERS OF RECOMMENDATION** Three letters of support for your admission into the program. You will find the forms for these letters in this package. It is a good idea to ask for letters from people who can speak of your accomplishments and potential as a student and potential administrator.

These materials should all be sent to:

Graduate Secretary
Department of Educational Administration
141 TEAC University of Nebraska-Lincoln
Lincoln, NE 68588-0360
402-472-3729
edadgradsec@unl.edu

If you have any questions about the status of your file, please feel free to contact the Graduate Secretary.

EDUCATIONAL ADMINISTRATION STUDENT APPLICATION SHEET

Certification Only-Educational Administration PreK-12

Date: _____

Personal:

Name:

Last	First	Middle
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Address:

Street	City	State	Zip
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Phone: _(_____)_____ Email: _____

Professional:

Position: _____ From _____ to _____
Month/year Month/year

Institution:

Address:

Street	City	State	Zip
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Phone: _(_____)_____ Email: _____

Program Interest:

(Please check area of emphasis)

_____ Elementary Principal
_____ Middle Level Principal
_____ Secondary Principal

_____ Curriculum Supervisor
_____ Special Education Supervision

Preferred adviser (if known) _____

It is the policy of the University of Nebraska not to discriminate based on gender, age, disability, race, color, religion, marital status, veteran's status, national or ethnic origin or sexual orientation. This is applicable to all University administered programs including educational programs, financial aid, admission policies and employment.

**Recommendation for Graduate Admission
Department of Educational Administration
Admissions Chair: Dr. Miles Bryant
UNIVERSITY OF NEBRASKA-LINCOLN**

PART 1: TO BE COMPLETED BY THE APPLICANT

Name of Applicant: _____

Proposed Program of Study: _____ Degree Objective: _____

Area of Specialization (if any) _____

Under the Family Rights and Privacy Act, university students have the right to inspect their files upon request. Please sign one of the following statements so that the person writing this letter of recommendation will know whether it will be held in confidence or whether it will be open to you for review upon request.

I *retain* my right to read this letter

I *waive* my right of access to this letter

Signature

Date

Signature

Date

PART 2: TO BE COMPLETED BY THE PERSON WRITING THE RECOMMENDATION

We are particularly interested in the applicant's ability to pursue advanced study and research, Please evaluate the applicant's abilities, motivation, capacity for independent thought, creativity, general character, and any other factors relevant to successful performance in the desired field of study. You may want to comment on the applicant's potential as a possible teaching or research assistant as well. We would also like to know how long and in what capacity you have known the applicant.

I believe this applicant's ability to pursue graduate study is:

___ **Outstanding**-the best in a current class, probably in the upper 5%

___ **Superior**-sound evidence that the candidate is in the top 10%

___ **Good**-ability stands out, is easily identifiable, probably in upper 15 %, clearly in upper 25%

___ **Average**

___ **Below Average**

Please use the space below for additional comments or attach letter.

Name: _____ Phone: _____

Institution/Organization: _____

Address: _____

Signature: _____

Mail this recommendation to the Graduate Chair of the department specified above, University of Nebraska-Lincoln, Lincoln, NE 68588

*The University of Nebraska-Lincoln does not discriminate in its academic, admissions or employment programs based on gender, age, disability, race color, religion, marital status, veteran's status, national or ethnic origin, or sexual orientation.