APPLICATION FOR UNDERGRADUATE ADMISSION
BACHELOR OF SCIENCE PROGRAM

□ Applied Developmental Psychology
□ Applied Developmental Psychology Practitioner Program – Evening

All information on this form is private and confidential, will only be used internally, and will not be released to persons or institutions outside the University without your written consent.
Please print or type

________________________

Check One: New Admit ________ Re-admit ________ Email: __________________

Social Security Number
(Required only if you intend to apply for federal financial aid)

Last Name First Name M.I. Maiden or Previous Name

Address:

Street Address

City State Zip Phone

Are you a Citizen or Permanent Resident of the US? _____ Yes _____ No

Country: ______________________________

Your response to the following questions is voluntary, and will not be used to deny access or admission. They will however, assist the University in proving data to demonstrate compliance with federal regulations.

Race/Ethnicity: (optional)

_____ Black

_____ Hispanic

_____ Male

_____ Date of Birth:

/ / /

_____ Asian/Pacific Islander

_____ White

_____ Female

month/date/year

_____ American Indian/Alaskan Native

ACADEMIC PREPARATION – Academic work beyond high school in order of attendance
College or University Major # of Credits Earned

EMPLOYMENT RECORD – Two most recent positions. Begin with present or last position held.
Name and Location of Employer Position Date Worked
Transfer candidates and current University of Pittsburgh students: List all courses in which you are currently registered, or will be registered prior to transfer into the ADP Program.

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<tr>
<th>Current Courses</th>
<th>Term</th>
<th>Credit Hours</th>
<th>Courses to Be Taken</th>
<th>Term</th>
<th>Credit Hours</th>
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THE UNIVERSITY OF PITTSBURGH IS COMMITTED TO AFFIRMATIVE ACTION. THEREFORE, IF THERE ARE ASPECTS OF YOUR BACKGROUND WHICH YOU FEEL MERIT SPECIAL CONSIDERATION, PLEASE COMMENT ON AN ATTACHED SHEET OF PAPER.

I attest that all information in this application is correct. I understand that action on the application cannot be taken until all transcripts and credentials are received.

Signature: ________________________________ Date: ________________

Procedures for Admission

DEADLINE: Applications are reviewed once a year. The deadline for admission into the Fall Term is March 15.

ADMISSION MATERIALS MUST INCLUDE:

1) Completed School of Education Undergraduate Application for Applied Developmental Psychology
2) Current Official Transcript with a minimum of 60 credits earned with a 2.5 QPA or better
3) Three-part, typewritten statement, not exceeding eight pages in length, discussing the following concerns in depth:
   o What experience(s) made you select child and youth work as a profession?
   o How will a knowledge of child development contribute to your professional competence?
   o What do you believe is one of the most important contemporary social issues, and why?
4) Three letters of recommendation, two academic references and one who has supervised your work with children.

ALL APPLICATION MATERIALS MUST BE SENT OR DROPPED OFF TO:
SCHOOL OF EDUCATION
ADMISSIONS AND ENROLLMENT SERVICES
5500 POSVAR HALL
PITTSBURGH, PA. 15260

***If you are a current Pitt student, make sure you complete an UNDERGRADUATE PROGRAM CHANGE ALONG WITH THIS APPLICATION in your academic dean’s office, in order for your records to be forwarded to the School of Education Office of Admissions and Enrollment Services for processing.

*** If transferring from another college or university, in addition to this ADP application, you must submit an online University Undergraduate Application for Admission, together with a $45.00 application fee. That application can be found at: https://app.applyyourself.com/?id=up-oak

The applicant should contact the person listed below to obtain specific program information.
Applied Developmental Psychology  Cindy Popovich  (412) 624-7053  cipop@pitt.edu

1/25/12
SCHOOL OF EDUCATION
UNDERGRADUATE PROGRAM IN APPLIED DEVELOPMENTAL PSYCHOLOGY
LETTER OF REFERENCE

Applicant’s Name ________________________

RETURN FORM TO:
UNIVERSITY OF PITTSBURGH
APPLIED DEVELOPMENTAL PSYCHOLOGY
ADMISSIONS AND ENROLLMENT SERVICES
5500 WESLEY W. POSVAR HALL
PITTSBURGH, PA 15260

Under titled IV of Public Law 90-247, students have the right to inspect letters of recommendation unless they have executed a waiver permitting the maintenance of confidentiality.

I, _______________________________________________________________, being fully informed of my right to inspect letters of recommendation under the “Buckley Amendment,” do hereby waive the right for the purpose of allowing the University of Pittsburgh to maintain this recommendation as a confidential communication.

Applicant’s Signature ________________________ Date ____________

The above applicant to the B.S. Program in Applied Developmental Psychology has submitted your name as a reference. Please indicate your wishes relative to the School’s sharing your comments with the applicant. Also, be advised that information contained in this letter will be used in precise accord with your wishes.

Individuals who are selected must be able to fulfill the intellectual requirements of undergraduate school and must possess personal qualifications considered essential to the professional practice of child development. Therefore, we are very much interested in whether or not the applicant has the qualities outlined below. Each item is ranked on a scale of 1 to 5, with 5 as very high. Please circle only one for each item.

<table>
<thead>
<tr>
<th>Low</th>
<th>High</th>
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<td>1   2 3 4 5</td>
<td>Don’t Know</td>
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1. Applicant’s capacity for change and openness to learning.
2. Applicant’s work or study habits demonstrating discipline, responsibility and productivity.
3. Applicant’s intellectual capacity to understand abstract concepts and deal with them effectively.
4. Applicant’s ability to be resourceful, creative, and original.
5. Applicant’s ability to work independently.
6. Applicant’s ability to express herself/himself clearly.
7. Applicant’s potential for leadership.
8. Applicant’s sensitivity to current social problems and issues.
10. Applicant’s capacity to use supervision effectively.
11. Applicant’s ability to relate well to others.
12. Applicant’s ability to be sensitive to the needs of others.
13. Applicant’s emotional stability and maturity.
14. Applicant’s integrity as a person.

We urge you to add further comments relative to your additional knowledge of this applicant. Also, if you wish to elaborate further on your above ratings, please feel free to do so.

Thank you very much for your cooperation. We would appreciate submission of this form at your earliest convenience so that we can begin to process the application.

Name – Please Print ________________________ Position or Title ________________________

Signature ________________________ Date ____________ Email Address ________________________