

**APPLICATION FOR ADMISSION TO  
NON-DEGREE PROGRAMS IN THE TEACHING OF WRITING**

Date of Application: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

NAME: \_\_\_\_\_  
Last First Middle

Gender: Male Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

Other name that might appear on credentials: \_\_\_\_\_

**CURRENT ADDRESS:**

\_\_\_\_\_  
Street Address City State Zip Code

**TELEPHONE NUMBERS:**

\_\_\_\_\_  
Home Business Other

\_\_\_\_\_  
Fax E-Mail Address (for confirmations)

**COLLEGES AND UNIVERSITIES ATTENDED: (Cite all post-secondary institutions)**

<u>Institution</u>	<u>Address</u>	<u>Dates Attended</u>	<u>Degree Earned</u>	<u>Date Received</u>	<u>Major</u>	<u>G.P.A.</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**WORK EXPERIENCE:**

<u>Current Employer</u>	<u>Years Employed</u>	<u>Address</u>
_____	_____	_____

Current Title/Responsibilities \_\_\_\_\_

If employed fewer than three years at current position, please indicate former employer:

How long were you employed there? \_\_\_\_\_

Have you taken any courses toward this program? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list the courses taken and the college or university:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All applicants **MUST** sign: I certify that these statements are true. I understand that misrepresentations on this application or on documents may be grounds for canceling admission to this non-degree certification program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Documents that must accompany this admission application:**

Official Transcripts Attached \_\_\_\_\_ Missing \_\_\_\_\_

Copy of New Jersey Standard Instructional Certificate Attached \_\_\_\_\_ Missing \_\_\_\_\_

Letter of recommendation, on school letterhead, from current or previous school principal or supervisor certifying the completion of **five (5) years of successful, full-time teaching under the appropriate certificate.** Attached \_\_\_\_\_ Missing \_\_\_\_\_

Missing, inaccurate, or incomplete documents will delay the processing of this application.

**OFFICE USE ONLY**

Applicant is \_\_\_\_\_ is not \_\_\_\_\_ accepted for non-degree admission. Date: \_\_\_\_\_

Program Representative: \_\_\_\_\_ Dean or Representative: \_\_\_\_\_

**PLEASE COMPLETE AND RETURN TO:  
RUTGERS UNIVERSITY  
GRADUATE SCHOOL OF EDUCATION  
OFFICE OF CONTINUING EDUCATION AND GLOBAL PROGRAMS  
10 SEMINARY PLACE, NEW BRUNSWICK, NJ 08901-1183**