



THE LEONHARD SCHIEMER SCHOOL OF
PSYCHOLOGY AND BIBLICAL COUNSELING

Application for Biblical Counseling Certificate



**Truett McConnell University equips
students to fulfill the Great Commission
by fostering a Christian worldview
through a biblically centered education
in a family friendly environment.**

100 Alumni Drive, Cleveland, GA 30528

Phone: (706) 865-2134, ext. 2131

(800) 226-8621

Fax: (706) 865-3110

Email: gradadmissions@truett.edu

www.truett.edu

International Student Admissions, please contact the Admissions Office for the appropriate application.

Thank you for your interest in the Biblical Counseling Certificate at Truett McConnell University (TMU). The Biblical Counseling Certificate is designed to equip lay counselors to meet the continuing demand for mental health services. It is our hope that we will train Christians who are interested in impacting the world both locally and globally.

Please review the graduate admission requirements and complete the required forms and application below. The information you include in your application will assist the Admissions Committee in evaluating your potential for success in graduate studies and in your future profession.

Contact the Office of Graduate Admissions at 706-865-2134, ext. 2131 or gradadmissions@truett.edu if we can assist you in any way.

General Graduate Admission Requirements

Applicants should meet the following minimum requirements for full admission to the graduate program:

- Bachelor's Degree from an accredited institution.

Admission Requirements for Master of Arts in Professional Counseling

A Biblical Counseling Certificate candidate will follow guidelines for the original requirements specified in the graduate Catalog along with the following:

- A two page essay on the personal statement on the following:
 - call to the profession,
 - reasons for obtaining a certificate, and
 - future professional goals.
- A current resume.
- Professional Recommendations. Two professional references are required from persons other than relatives who have known the applicant personally for at least two years. The references should communicate the applicants' qualifications and professional attributes.
- Any additional information as requested by the Admissions Committee.

Graduation Requirements

Biblical Counseling Certificate candidates will follow guidelines for the original requirements specified in the graduate catalog along with the following:

- The candidate should maintain a GPA of 3.0. The candidate should earn no more than one final grade of "C" in program courses. Students are allowed to replace one grade by retaking the course.
- Only a maximum of 9 graduate credit hours can be transferred from another college or university.

For transfer requirements, the Professional Counseling Faculty will review prospective candidate transfers on a case by case basis. Should a transfer be granted, admission requirements must be met but only a maximum of 9 credit hours will be accepted as a transfer credit.

Applicants must submit the following as a part of the general admission requirements:

1. Official application for admission form.
2. Official transcripts for all undergraduate and graduate coursework. The transcript from the institution granting the bachelor's degree is necessary for all applicants. If the degree program is incomplete when the application is filed, a transcript of work to that date must be submitted, and after graduation, a final official transcript must be furnished indicating the degree received.



**Please send application form and requested items to:
Truett McConnell University, 100 Alumni Drive, Cleveland, GA 30528
Attn: Graduate Admissions**

Please PRINT or type:

First Name: _____

Middle Name: _____

Last Name: _____

Preferred Name: _____

Social Security #: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

What year do you plan to enroll at Truett McConnell University? _____

PRESENT MAILING ADDRESS

Street: _____

City: _____ State: _____ Zip: _____

PERMANENT HOME ADDRESS

If different from above, specify dates mail should go to this address: ____/____/____ to ____/____/____

Street: _____

City: _____ State: _____ Zip: _____

PERSONAL BACKGROUND

Date of Birth: _____/_____/_____
Month Day Year

Sex: Male Female

Citizenship: USA Permanent Resident Other Country _____
(If you selected "Other Country," please request an International Student Application.)

Have you been convicted of a felony within the last seven years? Yes No

If you wish to identify an ethnic group, please indicate to which group you belong:

Native American Asian/Pacific Islander Latino/Chicano/Hispanic African American
 White (Caucasian) Other

Religious Affiliation:

Georgia Baptist Other _____

Church Name: _____ Pastor's Name: _____

Church Address:

City: _____ State: _____ Zip: _____ Phone: (____) _____

PREVIOUS EDUCATION

1. College/University Name: _____

City: _____ State: _____

Dates Attended: _____ Units completed at the time of application: _____

Degree and Date Received: _____

Cumulative GPA (based on a 4.0 scale): _____

2. College/University Name: _____

City: _____ State: _____

Dates Attended: _____ Units completed at the time of application: _____

Degree and Date Received: _____

Cumulative GPA (based on a 4.0 scale): _____



3. College/University Name: _____
City: _____ State: _____
Dates Attended: _____ Units completed at the time of application: _____
Degree and Date Received: _____
Cumulative GPA (based on a 4.0 scale): _____
4. College/University Name: _____
City: _____ State: _____
Dates Attended: _____ Units completed at the time of application: _____
Degree and Date Received: _____
Cumulative GPA (based on a 4.0 scale): _____

(List additional schools attended on a separate sheet.)

NON-DISCRIMINATION POLICY

Truett McConnell University does not discriminate on the basis of race, color, national and ethnic origin, sex, or disability in any of its policies, procedures or practices. This includes, but is not limited to, admissions, employment, financial aid, educational services, programs and activities. Inquiries regarding this policy may be directed to the Vice President of Student Services, 100 Alumni Drive, Cleveland, GA, 30528.

CERTIFICATION

I certify that to the best of my knowledge, the information furnished in this application is true and complete. I agree that if such information, or any information upon which my admission is based, is not true or complete, Truett McConnell University may rescind my degree. I further agree that if admitted, I will abide by the rules and regulations of Truett McConnell University including, but not limited to, those rules contained in the current Truett McConnell University catalog and student handbook. I acknowledge that all official transcripts which I forward to Truett McConnell University become the property of Truett McConnell University and will not be forwarded to any institution nor returned to me. I also understand that I am not eligible for financial aid unless I am accepted into a post-baccalaureate or graduate program. I am not eligible to receive financial aid for any courses taken prior to admission to the graduate program.

Signature

Date



Please send directly to: Office of Graduate Admissions, Truett McConnell University, 100 Alumni Drive, Cleveland, GA 30528
Questions? (706) 865-2134 ext. 2131, (800) 226-8621, (706) 865-3110 (Fax), Email: gradadmissions@truett.edu

Biblical Counseling Certificate – Professional Recommendation Form

This portion is to be completed by the applicant.

 Last name of Applicant (please print) First Middle

 Applicant's Address

This recommendation is from a (please circle one): Principal Professional Acquaintance Teacher/Professor
 Employer Other (please specify)_____

Federal law grants students access to their educational records after enrollment. I voluntarily waive my right of access to the information contained in this recommendation and agree that it shall remain confidential.

Applicant's Signature: _____ Date: _____

NOTE: This form is to be completed by someone who is not a member of your immediate family and has known you for at least one year. Please complete the top portion of each recommendation form yourself. All recommendations should be sent directly by the persons who complete them as indicated below. PLEASE ATTACH A SEPARATE LETTER OF RECOMMENDATION TO THIS FORM.

The individual named above is applying for admission to the Truett McConnell University Biblical Counseling Certificate Program. Thank you for your part in this important phase of the applicant's life.

1. In view of your knowledge of the applicant, how do you assess his or her abilities and character in the following categories as compared to his or her peers?

	Not Observed	Weak	Fair	Average	Very Good	Outstanding
Commitment						
Decision Making Ability						
Maturity						
Self-Discipline						
Communication Skills						
Interpersonal Relationships						
Dependability						
Leadership Skills						

2. How long have you known the applicant? _____

3. How well do you know the applicant? Very well Rather well Casually Not well

4. Do you see this person as someone whom you would hire? Yes No Unsure (Please comment on extra sheet.)

5. I recommend this applicant for admission to TMU Biblical Counseling Certificate program.
 Highly recommend Recommend Recommend with reservations Do not recommend

Name: _____ Signature: _____

Phone: (_____) _____ E-mail: _____ Date: _____

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Highly recommend Recommend Recommend with reservations Do not recommend

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