STUDENT-AT-LARGE:
WESTERN UNION PROGRAM

APPLICATION FOR ADMISSION

CENTER FOR SCIENCE & MATH EDUCATION
Life Sciences Building 431
Loyola University Chicago
6525 N. Sheridan Road
Chicago, IL 60626

Telephone: (773) 508-3513
Fax: (773) 508-3506
E-Mail: science@luc.edu

BIOGRAPHICAL INFORMATION

Social Security Number   _____-_____-_____
Birthdate _____/_____/______
Month  Day  Year

Surtitle (Circle One)   Ms.  Mrs.  Mr.  Sr.  Fr.  Br.  Dr.  Rev.

Name ____________________________________________
Last or Family  First  Middle  Previous or Other Surname(s)

Address ____________________________________________
Number and Street

City  State  Zip Code

Home Telephone ____________________________  Work Telephone ____________________________

E-Mail Address _________________________________________

Date you wish to enter:   ☐ Spring 20_____   ☐ Summer 20_____   ☐ Fall 20_____   ☐ First  semester available ______

The information in this box is collected for statistical purposes and will not be used in determining your eligibility for admission. Disclosure of all information in this section is voluntary.

Gender   ☐ Male  ☐ Female
Religion   ☐ Buddhist  ☐ Catholic  ☐ Hindu  ☐ Jewish  ☐ Muslim  ☐ Orthodox  ☐ Protestant  ☐ Other
Ethnic Background   ☐ African-American/Black  ☐ Asian/Pacific Islander  ☐ Caucasian/White  ☐ Hispanic/Latino(a)

☐ Multi-Racial  ☐ Native American  ☐ Other

Loyola University Chicago is an equal opportunity educator/employer.
**ACADEMIC INFORMATION**

List in chronological order all undergraduate colleges and universities attended.

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<th>Name and Location of Institution</th>
<th>Month &amp; Year of Attendance</th>
<th>Program/Major</th>
<th>Degree Received or Expected &amp; Date</th>
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List in chronological order all graduate and post-graduate work attempted or completed (include professional schools).

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**PERSONAL STATEMENT**

This program is open to teams of at least two teachers per high school. The ideal configuration of the team would be one ELL teacher and one science teacher. We realize that this configuration is not available at all schools, and will therefore accept applications from teams of teachers who deliver science instruction to ELL students. Each applicant should attach a typed personal statement to their application not exceeding three pages in total length. The personal statement should address: 1) How will this program enable you to better address the needs of ELL students in your building? 2) How will this program increase your ability to collaborate with other teachers in your building?

**LETTER OF RECOMMENDATION**

A letter of recommendation must be submitted on letterhead from a principal familiar with your skills as a science or ELL teacher. Please mail these letters to Center for Science and Math Education, Loyola University Chicago, Life Sciences Building 431, 6525 N. Sheridan Road, Chicago, IL 60626.

**EMPLOYMENT INFORMATION**

List in chronological order your employment history since high school. Include military service but omit summer and part-time work not relevant to your professional goal. If you are presently employed full-time, please so indicate.

_______________________________________________________________________________________________
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CERTIFICATION & AGREEMENT

I understand that official policies and procedures which govern enrollment at Loyola are published or referred to in the Graduate School Bulletin, the Graduate Student Handbook, the University’s Schedule of Classes, and the University’s Student Handbook. I understand and agree that these policies and materials, as revised from time to time, form the contract for my enrollment at Loyola University Chicago. I agree that I am responsible for obtaining and reviewing these policies and materials. I agree to be bound by them and I will pay the tuition, fees or other charges which are assessed in accordance with Loyola’s published financial policies.

Please be advised that as a student-at-large you may only register for approved courses for this admission category.

I certify that I have a baccalaureate degree from a college or university that is accredited by the appropriate regional accrediting association. I further recognize that there is no guarantee that credits earned from my enrollment as a student-at-large will be applicable to a degree at Loyola University Chicago. All graduate courses taken as a student-at-large will be computed into the graduate grade point average.

I hereby certify that the information given by me on this application is complete and accurate.

Applicant’s Signature __________________________________________ Date __________________________

We will review applications as they are received and will notify applicants of their admission status on a rolling basis.

APPLICATION DEADLINE: JUNE 1, 2009
APPLY EARLY!!

Please send all application materials to: Center for Science and Math Education
Loyola University Chicago
Life Sciences Building 431
6525 N. Sheridan Road
Chicago, IL 60626

For questions regarding our programs, application procedures, deadlines, etc. please contact us at science@luc.edu or (773) 508-3513