

SUMMARY OF ACADEMIC BACKGROUND

Department of Professional Studies: Counseling, Dept. 3374,
1000 East University Avenue
Laramie, Wyoming 82071-3374
307-766-2366

Name _____ Date _____

Permanent Address _____

Permanent Phone _____ Birth date – Month & Day _____

Home Address _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail Address _____

Undergraduate Institution _____

Degree _____ Date _____ Major _____

GPA _____

Graduate Institution _____

Degree _____ Date _____ Major _____

GPA _____

Courses taken for graduate credit:

| <u>Course Title</u> | <u>Cr. Hr.</u> | <u>Course Title</u> | <u>Cr. Hr.</u> |
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Please indicate your intended degree emphasis:

School Counseling _____ Mental Health Counseling _____