



Master's of Educational Counseling Program

Dear Educational Counseling Program Applicant,

Thank you for your interest in the Educational Counseling program. Please ensure that **a complete application is uploaded in one PDF file to the submission portal**. For detailed information on the application items please refer to the [Master's in Educational Counseling Program Application and Admission Guidelines](#). To assist you in compiling a complete application, please use the checklist below.

- ☐ Educational Counseling Program Application (*below*)
- ☐ Receipt for \$30.00 Credential fee - PPS Credential applicants only ([Directions on how to purchase](#))
- ☐ Personal Statement
- ☐ Two recommendations – uploaded to Box Link ([Form](#))
- ☐ Fingerprint/Background Clearance ([Certificate of Clearance or another CTC approved permit](#))
- ☐ Tuberculosis (TB) Clearance ([Acceptable documents](#))
- ☐ Unofficial Transcripts (Verifying course in math/quantitative, 3.0 GPA, & Bachelor's Degree)

Failure to follow submittal directions may be cause for application rejection or delay. Remember to merge your documents into one PDF file. There is free PDF merge software that you can use: [I Love PDF](#). The file should be named your Last Name_First Name_CSUBID.

Upload your application to the submission portal for your concentration:

Student Affairs Application

[Student Affairs Submittal Portal](#)

School Counseling Application

[School Counseling Submittal Portal](#)

Please be advised that meeting the requirements for program admission consideration does not guarantee program admission. Priority admission consideration is given to applicants meeting 100% of the requirements.

What happens after you submit your application:

- Applications are reviewed after the program deadline(s) and applicants will be notified regarding the status of their application.
- Applicants being considered for candidacy will be contacted to schedule their program interview.
- Applications are sent to the Admission Committee for review.
- Applicants are notified of the Admission Committee's decision. Decisions by the Admission Committee's evaluation is final.



Master's of Science in Educational Counseling

Once documents are submitted to the CSUB Credential Office, the documents become the property of CSU Bakersfield College of Social Science and Education. Please keep a copy of your documents for your records.

Your social security number is necessary for processing your credential program application. Personal and sensitive information is kept confidential and secure in accordance with data protection policies.

Educational Counseling Program Application

Term applying for: ☐ Fall 20__

Program Option:

- ☐ Master's in Educational Counseling: Student Affairs
- ☐ Master's in Educational Counseling: School Counseling / PPS
- ☐ Add on: Child, Welfare and Attendance Authorization
- ☐ PPS Credential only (for those who already hold a Master's Degree in Counseling)

Applicant Information:

CSUB ID#: _____ Legal Name: _____

Last

First

Middle

Preferred Name: _____ Birthdate: _____ SSN: _____

mm/dd/yyyy

Address: _____

Number and Street

City

State

Zip

Email: _____ Alt Email: _____

Telephone #: _____ Alt Telephone #: _____

Do you hold a bachelor's degree? ☐ No ☐ Yes,

If yes, degree, major, and institution: _____

Do you hold a Master's degree? ☐ No ☐ Yes,

If yes, degree, major, and institution: _____

Present Employer: _____

Address _____ City _____ State _____ Zip _____

Type of Work _____ Length of Employment _____

Education/Work Experience

Please list the last three years of relevant experience.

Dates	College or Employer	Academic Advisor or Name of Supervisor	Course of Study or Type of Work	Reason For Leaving

References:

Below list the names, positions, and contact information for three individuals who know your academic and professional abilities well (examples include: employers/supervisors, former associates, college instructors, persons in the helping professions, etc.). These individuals may be contacted, if necessary, for recommendations for you. In addition, please ask one individual listed below to complete the recommendation form found at the end of this application.

1. _____
2. _____
3. _____

- I. Include in this application, a typewritten personal statement (2-4 pages). This statement should provide insight into you as a person and as a prospective professional counselor. Include the reasons you want to become a counselor, what you plan to do professionally after you earn your degree, and the reasons (academic and/or personal) why you should be chosen for admission into this Program.
- II. The EDCS Program requires that all applicants obtain a Certificate of Clearance prior to beginning any fieldwork. Some local school districts will not honor an existing Certificate of Clearance and request the student obtain an additional Certificate of Clearance through their school district. If some cases, prior arrest record or other misconduct jeopardizes the issuance of a Certificate of Clearance and/or the PPS Credential. Please see the CSUB Credential Analyst (School of Social Sciences and Education Credentials Office) if you believe you may have difficulty in this regard.

I HEREBY SUBMIT MY APPLICATION FOR ADMISSION TO THE EDUCATIONAL COUNSELING PROGRAM at California State University, Bakersfield, with the above information concerning my background, qualifications, and plans for completion of the program. I certify that, to the best of my knowledge, all information contained in this application and on any supplemental material filed with the application is true and accurate, and I authorize the appropriate committee to inquire or seek any additional information it should require.

Signature: _____ Date _____

Disclaimer

Due to budgetary constraints within the California State University (CSU) system, certain program tracks may not be offered if the University is unable to meet required standards or resource requirements. Applicants are advised that all application and program-related fees, as well as any fees associated with university requirements, **are non-refundable**, regardless of program track availability.

By signing below, I acknowledge that I have read, understood, and agree to the terms of this disclaimer.

Applicant Name (Print): _____

Signature: _____ Date: _____



CALIFORNIA STATE UNIVERSITY
BAKERSFIELD

**College of Social Sciences
and Education**

CREDENTIAL/PROGRAM SERVICES REQUEST

California State University, Bakersfield charges a fee for all Education credential/program services. You are required to pay a non-refundable fee of \$30.00 for all credential/program applications. Please take this form along with your fee to the Cashier's Office.

Go to MyCSUB: make payment through MyCSUB student center and attach proof of payment with your credential application materials.

CSUB ID#: _____ Date: _____

Name: _____

Address: _____

City _____ State _____ Zip _____

E-mail: _____

Phone: _____
Home Cell

Credential/Program: _____

[How to Purchase the Credential Services Fee](#)

(School Counseling/PPS Track Only)



Education Counseling Candidate Acknowledgement, Release of Liability and Promise Not to Sue

Name: _____ **CSUB Student ID#** _____

As a student in the California State University, Bakersfield School of Social Sciences and Education, and as a participant in a field review for educational counseling candidates, I acknowledge and agree to abide by the following:

- I am familiar with Education Code section 51512, which states that *“The Legislature finds that the use by any person, including a pupil, of any electronic listening or recording device in any classroom of the elementary and secondary schools without the prior consent of the teacher and the principal of the school given to promote an educational purpose disrupts and impairs the teaching process and discipline in the elementary and secondary school, and such use is prohibited. Any person, other than a pupil, who willfully violates this section shall be guilty of a misdemeanor.”*
- I understand, as a condition of my acceptance into the Educational Counseling Program, California State University, Bakersfield, its employees and agents, will be taking visual/audio images of me during my time in the program. Visual/audio images are any type of recording, including photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips or accompanying written descriptions. CSUB will not materially alter the original images. I agree that CSUB owns the images and all rights related to them. The images will be used for evaluation of my instruction and demonstration of my fieldwork and course components.
- Additionally, the images may be used in any manner or media without notifying me, such as university-sponsored web sites, publications, promotions, broadcasts, advertisements, posters and theater slides, as well as for non-university uses. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them.
- I release CSUB and its employees and agents, including any firm authorized to publish and/or distribute a finished product containing the images, from any claims, damages or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.
- The Department will maintain all submitted materials collected in connection with my coursework or field review for a period of 7 years after my field review is completed.
- I am responsible for preparing a Student Release Form for every student in the classroom(s) involved in my field review, including obtaining and collecting permissions from the parents/legal guardians of each child in the classroom, and (as necessary) the Administrator/Counselor Release Form.
- I may not videotape or record, or cause to be videotaped or recorded, any student whose fully-executed release I have not obtained prior to the videotape being made.
- I must delete or destroy any videotapes or other recordings made by or stored on my personal device as soon as the purpose for which they were created and collected (*i.e.*, the field review) is complete.
- I must delete or destroy any videotapes or other recordings stored in common storage (e.g., cloud-based storage, flash drives, memory sticks, etc.) as soon as the purpose for which they were created and collected (*i.e.*, the field review) is complete.

- I will not upload or store any videotape or recording to non-secure and/or publicly accessible locations (e.g, YouTube, Facebook, Instagram, Snapchat). I understand violation of this requirement could have a negative effect on my ability to keep or earn a credential in California.
- I may not use any videotape or recording of my clinical practice made during my field review, whether created by me or another person, for any purpose other than for the field review.
- I hereby affirm that I will follow the privacy conventions and permission requirements of my program and school district/agency. I certify that I will secure and will hold on file signed copies of all necessary permission forms from all responsible individuals until my field review is complete.
- I hereby grant California State University, Bakersfield the full, unrestricted rights to the use of any and all materials written and submitted by me, in any form, including edited versions, in presentations, over the Internet, broadcast cable, satellite transmissions, and media that are unknown at this time, for instructional purposes worldwide.
- In consideration for participating in the field review, on behalf of myself and my next of kin, heirs and representatives, I release from all liability and promise not to sue the State of California, the Trustees of the California State University, California State University Bakersfield, and their employees, officers, directors, volunteers and agents (collectively, "University") from any and all claims, including claims of the University's negligence, resulting in any economic or noneconomic injury I may suffer because of my participation in the field review, including but not limited to any third party claims arising out of the use of videotaping or other recording.

Rights and Responsibilities of Students (CSUB Academic Integrity Policy)

The principles of truth and integrity are recognized as fundamental to a community of teachers and scholars. The University expects that both faculty and students will honor these principles and in so doing will protect the integrity of all academic work and student grades. Students are expected to do all work assigned to them without unauthorized assistance and without unauthorized assistance and without giving unauthorized assistance. Faculty have the responsibility of exercising care in the planning and supervision of academic work so that honest effort will be encouraged and positively reinforced.

Full text: <https://www.csub.edu/osrr/Academic%20Integrity%20index.html>

I am 18 years or older and competent to sign this release. I understand the legal consequences of signing this document, including (i) releasing the University from all liability; and (ii) promising not to sue the University. I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held to be invalid or unenforceable, then I will continue to be bound by the remaining terms. I have read this release and reviewed the full Academic Integrity Policy before signing, I understand its contents, and I freely accept the terms.

- ☐ I consent for CSUB to post my image to a Social Media website.
☐ **DO NOT** post my image to a Social Media website.

Candidate Signature

Candidate Printed Name

Date Signed

I hereby submit my application for admission to the Credential Program at California State University, Bakersfield. I certify that, to the best of my knowledge all information contained in this application and on any supplemental material filed with this application is true and accurate. I authorize the appropriate committee to inquire or seek any additional information it should require.