



## Master of Education Application

|                                                                                        |                         |                        |                              |
|----------------------------------------------------------------------------------------|-------------------------|------------------------|------------------------------|
| <b>For Office Use Only</b>                                                             | Date Received: _____    | Application _____      | Individualized Essay** _____ |
| _____ Official undergraduate transcript                                                | _____ Application Essay |                        |                              |
| _____ For consideration of transfer credits, official graduate transcripts and syllabi |                         |                        |                              |
| _____ Copy of teaching certification                                                   | _____ Recommendation 1  | _____ Recommendation 2 |                              |
| Preferred start Date _____ Concentration _____                                         |                         |                        |                              |

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_  
Preferred First Name \_\_\_\_\_ Name on previous records \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Pronouns \_\_\_\_\_ Student ID \_\_\_\_\_  
Best Email Address \_\_\_\_\_ Best Phone Number \_\_\_\_\_  
Home mailing address \_\_\_\_\_

### Experience in Education

Number of Years Teaching \_\_\_\_\_ Current Employer \_\_\_\_\_

Current Position \_\_\_\_\_

Do you hold a current teaching certificate? Yes No

My endorsements are in the following areas \_\_\_\_\_

Please provide a copy of your  
teaching certification.

Other teaching experience:

District/School \_\_\_\_\_ Position \_\_\_\_\_ Number of years \_\_\_\_\_

District/School \_\_\_\_\_ Position \_\_\_\_\_ Number of years \_\_\_\_\_

### Program Plan

Preferred semester to start your graduate program: \_\_\_\_\_  
Year September  
January  
May

#### Application Due Dates\*

December 9 for January  
April 24 for May  
August 14 for September

Pace: I plan to complete the program in 1.5 years I plan to complete the program in 3 years

*\* Applications are accepted on a rolling basis, and will be considered when complete. Students may enroll in some courses as a non-matriculated student prior to acceptance into the program.*

Country of Birth: \_\_\_\_\_ Are you a US citizen? Yes No

If you are a US Permanent Resident, indicate alien registration number and submit a copy (front & back) of your Permanent Resident Card. A# \_\_\_\_\_

(Optional) Universities are asked by the federal government, accrediting associations, and college guides, among others, to describe the racial/ethnic backgrounds of our students. To fulfill these requests, we ask you to answer the following questions:

Language(s) spoken at home \_\_\_\_\_ Are you of Franco-American heritage? Yes No

Please indicate if you are Hispanic/Latino Yes No

Please select one or more of the following racial categories to describe yourself: American Indian or Alaska Native

Asian Black or African American Native Hawaiian or other Pacific Islander White Other

## Education

Where did you receive your baccalaureate degree?

Institution \_\_\_\_\_ Degree In \_\_\_\_\_

Have you taken graduate level courses that you would like to submit for transfer into your concentration?    Yes    No    *Only graduate courses in which you received a 3.0 or above and were taken in the last five years from a regionally accredited institution will be considered for transfer.*

Institution \_\_\_\_\_ Course \_\_\_\_\_ Grade \_\_\_\_\_ Date Completed \_\_\_\_\_

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**Please provide official transcripts (undergraduate and graduate) from all the above institutions, as well as syllabi for the graduate courses listed above.** Official transcripts must be sent **directly** from the above institutions to the Office of Graduate Studies. *This office will obtain all UM System school transcripts (UMA, UMF, UMFK, UMM, UM, UMPI, and USM).*

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## Recommendations

Two recommendations are required:

- One from current administrator.
- One from a professional colleague of the applicant's choosing.

Please provide each reference with a copy of the blank Recommendation Form found online.

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## Concentration

Secondary Education Initial Licensure Subject Area:

(Maine only)

Nature-Based Education

Systems of Student Support

STEAM for Early Childhood and Elementary Educators

Gifted and Talented Education

English for Speakers of Other Languages

Special Education

Individualized \*\* (please see below for guidelines)

**\*\* Individualized Concentration Guidelines:** Please submit the following additional materials in one document:

- Propose a title for the focus of your concentration.
  - List the courses you have taken that you are requesting for transfer. Include course prefix, title, institution, and grade received. (Official transcripts and syllabi are required for final decision regarding transfer of credit.)
  - List the courses you may take at UMF or other institutions to complete the concentration (refer to UMF's graduate catalog for UMF courses).
  - Provide a brief (500 word limit) description of the focus. Include: What knowledge and skills do you hope to obtain? How would this focus promote your growth as a teacher leader?
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## Application Essay

Applicants must write a 500-word essay on the following:

Begin by describing your philosophy for teaching and learning for your grade level and/or subject area. Then explain how UMF's Master's in Education will support your work and growth as an educator. Please consider including how your philosophy has evolved or has been influenced by mentors or practices that you have encountered.