



### CRITERIA FOR ADMISSION

Each applicant must have a baccalaureate degree from an accredited college or university and an undergraduate background appropriate for graduate study.

Applicants to the graduate programs in English must at the minimum meet one of the following criteria for admission:

1. A GPA of 3.0 in the major or minor fields of study.
2. A minimum of five courses in the field of study with a minimum GPA of 2.67.

### APPLICATION PROCESS

All applicants for admission must submit the following materials to the **Business Office, Washington College, 300 Washington Avenue, Chestertown MD 21620:**

1. A \$50 application fee (check made payable to Washington College).
2. A completed graduate admission application form.

The following materials must be submitted to the **Office of Admissions, Washington College, 300 Washington Avenue, Chestertown MD 21620:**

3. All official undergraduate and, if applicable, graduate transcripts.
4. A one to two page statement of purpose.
5. Two letters of recommendation and the accompanying forms.

### APPLICATION DEADLINES

- Fall Semester: August 1
- Spring Semester: December 1
- Summer Semester: April 15

For additional information, please see the 2012-2014 Graduate Catalog <http://grad.washcoll.edu/>.

*Washington College does not discriminate on the basis of race, color, religion, gender, sexual preference, age, handicap, marital status or national or ethnic origin in the administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school administered programs.*



WASHINGTON COLLEGE  
EST. 1782  
APPLICANT

GRADUATE

INFORMATION

I am applying for admittance to the graduate program in:  English

If admitted, I intend to enroll in the  Fall  Spring  Summer Year \_\_\_\_\_

At the time of my initial enrollment, I will be an employee of Washington College  Yes  No

APPLICANT

Legal Name \_\_\_\_\_  
*Last/Family (Enter name exactly as it appears on official documents) First/Given Middle (complete) Jr. etc.*

Preferred Name, if not first name (only one) \_\_\_\_\_ Former last name(s) \_\_\_\_\_

Birth Date \_\_\_\_\_  Female  Male US Social Security Number, if any \_\_\_\_\_  
*(mm/dd/yyyy) (Required for US Citizens and Permanent Residents applying for financial aid via FAFSA)*

Preferred Telephone  Home  Cell Home (\_\_\_\_) \_\_\_\_\_ Cell(\_\_\_\_) \_\_\_\_\_

Email Address, preferred \_\_\_\_\_ Email Address, other \_\_\_\_\_

Permanent home address \_\_\_\_\_  
*Number & Street Apartment #*

\_\_\_\_\_  
*City/Town County State/Province Country ZIP/Postal Code*

**If different from above**, please give your current mailing address for all admission correspondence. (from \_\_\_\_\_ to \_\_\_\_\_)  
*(mm/dd/yyyy mm/dd/yyyy)*

Current mailing address \_\_\_\_\_  
*Number & Street Apartment #*

\_\_\_\_\_  
*City/Town County State/Province Country ZIP/Postal Code*

Citizenship Status \_\_\_\_\_ Non-US Citizenship(s) \_\_\_\_\_

Birthplace \_\_\_\_\_  
*City/Town State/Province Country*

Years lived in the US? \_\_\_\_\_ Years lived outside the US? \_\_\_\_\_

**Optional** *The items below are optional. No information you provide will be used in a discriminatory manner.*

Religious Preference \_\_\_\_\_ US Armed Services veteran status \_\_\_\_\_

1. Are you Hispanic/Latino?  Yes, Hispanic or Latino (including Spain)  No *(if yes, please describe your background)*

2. Regardless of your answer to #1, please indicate how you identify yourself. *(Check one or more and describe your background)*

American Indian or Alaska Native (including all Original Peoples of the Americas)

Are you enrolled?  Yes  No If yes, please enter Tribal Enrollment Number \_\_\_\_\_

Asian (including Indian subcontinent and Phillipines)

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original Peoples)

White (including Middle Eastern)

**EDUCATIONAL INFORMATION**

*Baccalaureate Degree(s):*

School \_\_\_\_\_ Date Awarded \_\_\_\_\_ Major \_\_\_\_\_ GPA in Major \_\_\_\_\_

School \_\_\_\_\_ Date Awarded \_\_\_\_\_ Major \_\_\_\_\_ GPA in Major \_\_\_\_\_

*Advanced Degree(s):*

Degree \_\_\_\_\_ School \_\_\_\_\_ Date Awarded \_\_\_\_\_ Major \_\_\_\_\_

Degree \_\_\_\_\_ School \_\_\_\_\_ Date Awarded \_\_\_\_\_ Major \_\_\_\_\_

*NOTE: An official transcript from all colleges attended should be sent directly to the Office of Admissions.*

**TRANSFER CREDITS FOR GRADUATE COURSES COMPLETED ELSEWHERE**

*List courses by title and department/course number (e.g. ENG 660: Romantic Literature)*

\_\_\_\_\_ *Course No.* \_\_\_\_\_ *Course Title* \_\_\_\_\_ *College/University*

\_\_\_\_\_ *Course No.* \_\_\_\_\_ *Course Title* \_\_\_\_\_ *College/University*

\_\_\_\_\_ *Course No.* \_\_\_\_\_ *Course Title* \_\_\_\_\_ *College/University*

*NOTE: No more than three courses may be transferred for credit toward the M.A. from Washington College.*

**LETTERS OF RECOMMENDATION & STATEMENT OF PURPOSE/ENTRANCE ESSAY**

All applicants are required to ensure that at least two letters of recommendation, preferably from former professors and employers, be sent directly to the Office of Admissions. A form for this purpose is provided.

All candidates must submit a one to two page entrance essay. The topic of the essay should reveal the candidate's career objectives, their motivation for attaining an advanced degree in their chosen program, and demonstrate their critical thinking and written communication skills.

My signature below indicates that all information in my application is complete and factually correct.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**PLEASE NOTE:** This form and your application fee need to be mailed to the **Business Office, Washington College, 300 Washington Avenue, Chestertown MD 21620.**



**WASHINGTON COLLEGE**  
EST. 1782

**GRADUATE APPLICANT  
RECOMMENDATION FORM**

**TO THE APPLICANT:**

Please complete the section below and ask your recommender to mail the completed form directly to the **Office of Admissions, Washington College, 300 Washington Avenue, Chestertown MD 21620.**

Legal Name \_\_\_\_\_  
*Last/Family (Enter name exactly as it appears on official documents) First/Given Middle (complete) Jr. etc.*

Permanent home address \_\_\_\_\_

Number & Street

Apartment #

City/Town

County

State/Province

Country

ZIP/Postal Code

If different from above, please give your current mailing address for all admission correspondence. (from \_\_\_\_\_ to \_\_\_\_\_)  
(mm/dd/yyyy) (mm/dd/yyyy)

Current mailing address \_\_\_\_\_  
Number & Street Apartment #

City/Town

County

State/Province

Country

ZIP/Postal Code

I am applying for admittance to the graduate program in:  English

If admitted, I intend to enroll in the  Fall  Spring  Summer Year \_\_\_\_\_

In accordance with federal regulations, materials in student files, such as recommendation forms, are open to inspection upon request, unless the student has waived the right of access in advance. **You may waive that right, specifically for this recommendation, by signing here.** Your waiver will in no way affect your admission to the graduate program.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

TO THE RECOMMENDATION WRITER:

Please write a letter of recommendation on a separate sheet and attach this form. The recommendation form and your letter should be placed in a sealed envelope, with your signature across the seal, and mailed directly to the **Office of Admissions, Washington College, 300 Washington Avenue, Chestertown MD 21620.**

In your letter of reference, please assess the applicant's potential as a graduate student. You should consider previous accomplishments, intellectual independence, capacity for analytical thinking, ability to work with others, ability to organize and express ideas clearly, and motivation for pursuing an advanced degree. Please explain in what capacity you have known the applicant and for what period of time.

Please rate the applicant in the following areas:

	Outstanding	Excellent	Good	Poor	Unable to Judge
Analytical Abilities					
Quantitative Abilities					
Maturity					
Written Communication Skills					
Oral Communication Skills					
Motivation					

Recommender's Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Name of Institution or Organization \_\_\_\_\_



WASHINGTON COLLEGE  
EST. 1782

GRADUATE PROGRAM  
COMMITMENT TO ENROLL FORM

This form is to be used to either accept, decline or defer your admission to the Graduate Program at Washington College. Please check all appropriate responses and return this form to the **Business Office, Washington College, 300 Washington Avenue, Chestertown MD 21620.**

\_\_\_\_\_ I accept the offer of admission to the Graduate Program at Washington College and am enclosing my enrollment deposit in the amount of **\$300**. My enrollment will be effective:

Fall 20\_\_       Spring 20\_\_       Summer 20\_\_

\_\_\_\_\_ I defer the offer of admission to the Graduate Program at Washington College. I intend to register for my first classes effective:

Fall 20\_\_       Spring 20\_\_       Summer 20\_\_

I agree to abide by the provisions of the following statements:

*Please be advised that all offers of admission to Washington College are contingent upon the successful completion of the academic program in progress at the time of admission. Accordingly, accepted applicants for admission are required to forward an updated, official copy of college transcript(s) to the Admissions Office as soon as final grades are available.*

*Accepted applicants are also expected to honor the College's Standard of Conduct. Specifically, all students entering Washington College agree to refrain from any action, which, in the opinion of the Officers of the College, might bring disrespect on the institution, or on any of its members. The College reserves the right to cancel an offer of admission should the Standard of Conduct be violated.*

\_\_\_\_\_ I respectfully decline the offer of admission to the Graduate Program at Washington College.

Legal Name \_\_\_\_\_  
*Last/Family (Enter name **exactly** as it appears on official documents)      First/Given      Middle (complete)      Jr. etc.*

Permanent home address \_\_\_\_\_  
*Number & Street      Apartment #*

\_\_\_\_\_  
*City/Town      County      State/Province      Country      ZIP/Postal Code*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

Please return this form to the **Business Office, Washington College, 300 Washington Avenue, Chestertown MD 21620.** Questions? Please call Dr. Andrea Lange at 410-778-7776.