

UNIVERSITY OF WYOMING

MS Program in Kinesiology & Health Supplemental Application

* Note: This form must be completed and submitted as part of your online application.

Name _____
Last First Middle/Maiden

Address _____
Street City State Zip

Home telephone _____ Work phone _____ Cell phone _____

Email _____ Wyoming resident? ___yes ___no U.S. Citizen? ___yes ___no

Ethnicity ___ Native American or Alaskan Native ___ Hispanic/Mexican American ___ Other
___ Asian or Pacific Islander ___ White (non-Hispanic) ___ Decline to answer
___ African American/Black/non-Hispanic ___ Multiracial

K&H M.S. Program you are applying to (check only one)

Kinesiology & Health _____
Physical Education Teacher Education _____
Physical Education Teacher Education (Distance) _____

Mentors: As part of the application process, potential students are required to communicate with faculty members in their field of study regarding mentorship availability; **please note that without agreement from a faculty member to serve as your mentor, you will not be admitted to the program.** More information about each faculty member can be found using the following link: <http://www.uwyo.edu/kandh/departments-directory/faculty/index.html>. Below, please indicate which faculty members you have communicated with:

Kinesiology & Health		Physical Education Teacher Education
___ Danielle Bruns	___ Tucker Readdy	___ Mark Byra
___ Boyi Dai	___ Emily Schmitt	___ Jayne Jenkins
___ Evan Johnson	___ Derek Smith	___ Tristan Wallhead
___ Christine Porter	___ Arthur Zhu	

Intended Form of Final Assessment: The Division of Kinesiology and Health currently offers two options for completion of the degree requirements. For more information, please use the following link:

<http://www.uwyo.edu/kandh/graduate-studies/graduate-programs.html>. Below, please indicate the form of final assessment you are currently most interested in:

___ Plan A/Thesis (primarily intended for students who intend to apply to Ph.D. programs upon completion of the degree)
___ Plan B (primarily intended for students who plan to seek professional employment upon completion of the degree; paper-based and experiential learning options)

Statement of Intent: In no more than two pages (typed, 1.5 spaced, 12-point font), please address the following questions:

1. What area of study are you interested in pursuing and why? [Note: this information should align with the faculty mentors you have communicated with.]
2. What attracted you to the University of Wyoming?
3. What is your intended career path upon completion of the M.S. degree?

Sample of Scientific Writing: To assist faculty members in better assessing your formal writing skills, please submit a formal assignment (e.g., a final paper, substantive lab report, etc.) from an undergraduate course in your intended area of study.

Interest in a Graduate Assistantship: The Division of Kinesiology and Health offers a limited number of graduate assistantships per academic year. To learn more about the assistantships, please visit the following website: http://www.uwyo.edu/uwgrad/files/docs/sap_graduate_fellowships_assistantships.pdf. If you are interested in a graduate assistantship, please answer the questions below:

1. Are you authorized to work in the United States? ___ Yes ___ No
2. If no, what is your visa status?

3. Have you ever been convicted of or pled guilty or no contendere/no contest to any felony? ___ Yes ___ No
4. If yes, please explain?

5. Other than the graduate assistantship, what other economic resources (including government aid) will be available for you to fund your graduate studies?

With respect to Title IV funds of the Higher Education Act, I certify that I have not been convicted of, pled nolo contendere or guilty of a crime, or been judicially determined to have committed fraud. I certify that all information given on this application, supporting documents, and interviews are correct to the best of my knowledge. I understand that giving false information may disqualify my application or result in termination. I understand that this application is not intended to be a contract of employment. I agree that the university may require my participation in retirement plans while employed. I further authorize the university to investigate all statements made on my application for employment. I authorize such educational institutions and employers and others (and their agents or employees) to respond to questions concerning information given on this application and I further release from liability the University of Wyoming, such former employers, institutions, or persons providing such information. I understand that no offer of benefits such as insurance vacation, or salary rate is final until approved by the Human Resources Department. I will be required to serve a probationary period during which time I may be terminated in accordance with university policy; federal law requires employers to document the identity and employment authorization of each new employee.

Signature of applicant _____ **Date** _____

Return to: Division of Kinesiology & Health, University of Wyoming, Dept. 3196, 1000 E. University Avenue, Laramie, WY 82071 or by email to tucker.readdy@uwyo.edu.