



Counseling Program Admission Packet

Name: _____ Date: _____

Permanent Address: _____

Phone: _____ Email Address: _____

Track Choice:

- ☐ Mental Health
☐ School Counseling

List all Undergraduate Institution(s):

Degree	Institution	Completion Date (Actual or Anticipated)	Major	GPA

List all Graduate Degree Institution(s):

Degree	Institution	Completion Date (Actual or Anticipated)	Major	GPA

List all Licenses and Certifications:

License/ Certification	License/ Certification Number	State	Current Status	Expiration Date

List any counseling-related training you have received:

Name of Training	Training Date	Training Institution/ Company

Have you been dismissed from or have you voluntarily discontinued any higher education program in your lifetime?

☐ Yes

- o If yes, what degree program, what college/university, what city/state/country?

- o If yes, please describe the circumstances of your dismissal or discontinuation?

☐ No

Within the past three years (from the date of your application) have you been terminated/dismissed from or forced to resign from any paid or volunteer position?

- Yes

- o If yes, what position?

- o If yes, please describe the circumstances of your termination or discontinuation:

- No

As a prospective counseling graduate student, I understand:

- ☐ The counseling graduate program completes Department of Criminal Investigations and Department of Family Services background checks for all students prior to beginning field placement.
- ☐ Certain violations of ethical and legal conduct may disqualify individuals from participating in field placements and may also affect future eligibility for state licensure or employment in counseling-related fields.
- ☐ Violations of ethical or legal conduct may result in disciplinary action or dismissal from the graduate program.
- ☐ As a counseling graduate student, ongoing feedback is an important aspect of professional growth. I will expect to receive and meaningfully integrate feedback throughout the graduate program.
- ☐ My admission is for the identified academic year and may not be deferred or applied to any other academic year.

Printed Name

Signature

Upload Required Documents for Complete Application:

- ☐ Counseling Program Admissions Packet
- ☐ Personal Statement (3-4 pages double-spaced)
 - ☐ Motivations and goals in pursuing a career in professional counseling.
 - ☐ Life or professional experiences that prepare you for a career in professional counseling.
 - ☐ Your strategies for managing stress and emotions.
 - ☐ Your ability to recognize and navigate conflicts between personal values and professional ethical obligations.
 - ☐ Describe an instance where you received challenging feedback and how you utilized or addressed the feedback going forward.
 - ☐ Anything you would like us to know.
- ☐ Resume or CV
- ☐ Unofficial Copies of Transcripts for all institutions (including current enrollment)
- ☐ Three letters of recommendation addressing your interpersonal, professional, and academic ability related to the field of professional counseling (upload contact information)

The University of Wyoming Student Code of Conduct (2025) states, False Representation(s) as described here is ***Prohibited Conduct***: “Knowingly making false representation(s) to the University in any form. Submitting false information, documentation or withholding information. False representation at the time of admission or readmission may cause an individual to be ineligible for admission to, or continuation at, the University of Wyoming.”