

Date _____

**Indiana University Southeast
Master of Science in Education and/or
Licensing Programs
General Advising and Information Session**

Welcome to a General Advising and Information Session for the Graduate Program at IU Southeast. We appreciate your interest in our program. We hope this informational session will help you make decisions about your future in Graduate Studies.

Please provide us with the information below. We will keep this form on file in case we need to contact you in the future.

NAME _____

ADDRESS _____

CELL PHONE () _____ HOME PHONE () _____

EMAIL ADDRESS _____

PLACE OF WORK _____

JOB TITLE _____

IUS 10digit Student ID 000 _____ Date of Birth _____
(These two items provide information so we can enter you into the system and help facilitate your application should you choose to apply.)

Which program(s) most interest you?

<input type="checkbox"/> MS in Elementary Education	<input type="checkbox"/> MS in Secondary Education
<input type="checkbox"/> MS in Elementary Education with a Concentration in: <input type="checkbox"/> ENL <input type="checkbox"/> Gifted and Talented <input type="checkbox"/> Reading <input type="checkbox"/> Technology	<input type="checkbox"/> MS in Secondary Education with a Concentration in: <input type="checkbox"/> ENL <input type="checkbox"/> Gifted and Talented <input type="checkbox"/> Reading <input type="checkbox"/> Technology
<input type="checkbox"/> MS in Counseling: <input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> Not sure	<input type="checkbox"/> Post -Masters license in Educational Leadership <input type="checkbox"/> Indiana <input type="checkbox"/> Kentucky
<input type="checkbox"/> License only: <input type="checkbox"/> ENL <input type="checkbox"/> Gifted and Talented <input type="checkbox"/> Reading <input type="checkbox"/> Technology	<input type="checkbox"/> Plus 30 (Indiana) <input type="checkbox"/> Rank I (Kentucky) <input type="checkbox"/> ENL <input type="checkbox"/> Gifted and Talented <input type="checkbox"/> Reading <input type="checkbox"/> Technology <input type="checkbox"/> Educational Leadership

Based on what you know so far, what parts of our program are attractive to you?

Based on what you know so far, what parts of our program are less attractive to you?

When would you like to begin taking courses? Fall 201__
 Spring 201__
 Summer 201__

Optional Information:

(This information helps us track interests in our programs to report to our accrediting agency.)

Gender: Male
 Female

Ethnicity: Hispanic
 American Indian or Alaska Native
 Asian or Pacific Islander
 African American
 White (European American)