



JON L. JENMARC, INCORPORATED
Consultants in Education
1350 Belmont Street, Williamsburg Square, Suite #101
Brockton, MA 02301-4430
(V) 508.586.3574 www.jonljenmarc.com (Fax) 508.586.6448



ENDICOTT COLLEGE
VAN LOAN SCHOOL OF GRADUATE AND PROFESSIONAL STUDY

M ED DEGREE and LICENSE PROGRAMS IN EDUCATION APPLICATION REQUIREMENTS

Admission to an Endicott College graduate program requires a Bachelor's degree from an accredited college.

Application to ENDICOTT COLLEGE/JON L. JENMARC PROGRAMS must be made directly to JON L. JENMARC.
Application materials must be submitted directly to JON L. JENMARC Inc.

ALL official Degree/License documents (grades/transcripts/degree) will mail directly from ENDICOTT to the student.
JENMARC will bill all invoices to the student; the student pays JENMARC directly.

After official Acceptance to a Program, all students are eligible to apply for Financial Aid through ENDICOTT COLLEGE.

PLEASE MAIL or DELIVER the following items to:

JON L. JENMARC INC
1350 BELMONT STREET, WILLIAMSBURG SQUARE # 101
BROCKTON MA 02301-4430

1. Completed graduate application and non-refundable \$50.00 application fee (check made payable to Endicott College.) These items may be snail-mailed to JENMARC at the address above or delivered to the office. Application may be faxed to 508.586.6448 or scanned/emailed to fran.jenmarc@gmail.com
2. Two letters of recommendation; (Endicott College Recommendation Form may be used.) Letters/Forms may be faxed to the JENMARC Office at 508.586.6448 or emailed to fran.jenmarc@gmail.com or snail-mailed to the address above.
3. **Official** transcripts of all post-secondary academic work sent directly from the institution(s). Unopened official transcripts may be mailed/delivered directly to JON L. JENMARC INC at the address above.
Electronic submission of official transcript(s) may be emailed to fran.jenmarc@gmail.com
4. Essay of 250-500 words on career goals and motivation for graduate study. This may be faxed to 508.586.6448 or emailed to fran.jenmarc@gmail.com
5. Test of English as a Foreign Language (TOEFL) for ***students whose native language is not English***; minimum score of 550 (paper-based) or 79 (iBT) is required. The institutional code for Endicott College is 3369. Endicott also accepts an IELTS score of 6.0 or better.
6. Applicants are also required to interview with the program director as part of the Application Review. Please call the JENMARC Office at 508.586.3574 for further direction in this matter.

All admission requirements must be satisfied in order to be formally accepted in a degree program. Students must be formally admitted to a program before the completion of six (6) Endicott credits.

*NB: The GRE or MAT is no longer required for Admission to Endicott College Graduate Programs in Education.



Application for Graduate Admission

PLANNED DATE OF ENROLLMENT Fall Semester Spring Semester Summer Semester Year _____

PERSONAL INFORMATION (Please print your responses) Male Female Date of Birth _____/_____/_____

Name: _____
Last/Family Name First Middle (Former Name) Social Security Number/ Individual Tax Identification Number _____

Permanent Mailing Address _____

City _____ State or Country _____ Zip or Postal Code _____

Telephone (Primary) () _____ Telephone (Secondary) () _____ Email Address _____

* Please choose one Degree / Major / Concentration / Location or Delivery. * See catalog or website for application requirements for your program

Degree / Major	Concentration/Specialization	Location / Delivery
Master of Arts in Interior Architecture <input type="checkbox"/> First Professional (81 credits) <input type="checkbox"/> Post Professional (37 credits) Master of Fine Arts in Interior Architecture <input type="checkbox"/> First Professional (108 credits) <input type="checkbox"/> Post Professional (64 credits)	<input type="checkbox"/> Commercial / Institutional Interior Environments <input type="checkbox"/> Healthcare Interior Environments <input type="checkbox"/> Residential Interior Environments <input type="checkbox"/> Sustainable Interior Environments	<input type="checkbox"/> Beverly <input type="checkbox"/> Beverly Fifth Year
Master of Business Administration <input type="checkbox"/> Full-Time Fifth Year	N/A	<input type="checkbox"/> Beverly
Master of Business Administration <input type="checkbox"/> Part-Time	<input type="checkbox"/> Accounting <input type="checkbox"/> Entrepreneurship <input type="checkbox"/> Finance <input type="checkbox"/> General Management <input type="checkbox"/> Healthcare <input type="checkbox"/> Health Informatics <input type="checkbox"/> Homeland Security <input type="checkbox"/> Hospitality and Hotel Management <input type="checkbox"/> Human Resource Management <input type="checkbox"/> Information Technology Management <input type="checkbox"/> International Business <input type="checkbox"/> Maritime Economics <input type="checkbox"/> Marketing <input type="checkbox"/> Non-Profit Management <input type="checkbox"/> Operations Management <input type="checkbox"/> Project Management <input type="checkbox"/> Undecided	<input type="checkbox"/> Beverly <input type="checkbox"/> Boston <input type="checkbox"/> Online <input type="checkbox"/> _____
Master of Education <input type="checkbox"/> Accelerated Secondary Teacher Preparation Program <input type="checkbox"/> Autism and Applied Behavior Analysis <input type="checkbox"/> Applied Behavior Analysis <input type="checkbox"/> Autism Certificate Only (non-degree) <input type="checkbox"/> Early Childhood Education <input type="checkbox"/> Early Childhood and Elementary Education <input type="checkbox"/> Elementary Education <input type="checkbox"/> Reading and Literacy <input type="checkbox"/> Secondary Education Content Area _____ <input type="checkbox"/> Special Education <input type="checkbox"/> Special Education and Applied Behavior Analysis <input type="checkbox"/> ABA Certificate Only (non-degree)	Please select one: <input type="checkbox"/> Initial Licensure* <input type="checkbox"/> Professional Licensure * <input type="checkbox"/> Non-Licensure <input type="checkbox"/> Licensure Only (non-degree)* MEPID # _____ Please select one: <input type="checkbox"/> Moderate Disabilities* <input type="checkbox"/> Severe Disabilities * Please select one: <input type="checkbox"/> PreK-8* <input type="checkbox"/> 5-8* <input type="checkbox"/> 9-12* * If you are pursuing initial or professional licensure, a passing score on the Communication and Literacy MTEL is required for admission to the Master's in Education program. Please submit a copy of your passing scores with your application. If you have passed any additional MTEs. or currently possess a license, please include copies of those documents at the time of application.	<input type="checkbox"/> Beverly <input type="checkbox"/> Beverly Fifth Year <input type="checkbox"/> Boston <input type="checkbox"/> Online <input checked="" type="checkbox"/> <u>Jenmarc</u>
Master of Education <input type="checkbox"/> Administrative Leadership	<input type="checkbox"/> School Business Administrator <input type="checkbox"/> School Principal / Assistant Principal <input type="checkbox"/> PreK-6* <input type="checkbox"/> 5-8* <input type="checkbox"/> 9-12* <input type="checkbox"/> Special Education Administrator <input type="checkbox"/> Superintendent / Assistant Superintendent	<input type="checkbox"/> Beverly <input checked="" type="checkbox"/> <u>Jenmarc</u>
Master of Education <input type="checkbox"/> Athletic Administration	<input type="checkbox"/> Collegiate Level <input type="checkbox"/> Global Sport Management <input type="checkbox"/> Secondary School and Recreational <input type="checkbox"/> None	<input type="checkbox"/> Online
Master of Education <input type="checkbox"/> Organizational Management <input type="checkbox"/> Higher Education Administration		<input type="checkbox"/> Online <input type="checkbox"/> _____
Certificates: (non-degree)	<input type="checkbox"/> Autism Certificate <input type="checkbox"/> ABA Certificate <input type="checkbox"/> Social / Emotional Development	
Master of Science <input type="checkbox"/> Homeland Security	<input type="checkbox"/> General Homeland Security <input type="checkbox"/> Emergency Management <input type="checkbox"/> Cybersecurity	<input type="checkbox"/> Beverly <input type="checkbox"/> Beverly Fifth Year
Master of Science <input type="checkbox"/> Information Technology	<input type="checkbox"/> Health and Medical Informatics <input type="checkbox"/> General	<input type="checkbox"/> Beverly
Nursing <input type="checkbox"/> Master of Science in Nursing <input type="checkbox"/> Pre-Master's <input type="checkbox"/> Post-Master Certificate	<input type="checkbox"/> Nursing Administration <input type="checkbox"/> Nursing Education <input type="checkbox"/> Global Health Nursing <input type="checkbox"/> Family Nurse Practitioner	<input type="checkbox"/> Beverly <input type="checkbox"/> Beverly Fifth Year

PERSONAL INFORMATION (continued)

Marital Status Single Married Widowed Separated / Divorced

Are you currently a member of the military or a veteran of the military? No Yes If yes, which branch? _____

Are you an employee at Endicott College? No Yes If yes, job title _____

Is a member of your family an employee at Endicott College? No Yes If yes, job title _____

Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? No Yes
[Note that you are not required to answer "yes" to this question, if the criminal adjudication or conviction has been expunged, sealed, annulled, or otherwise ordered by a court to be kept confidential.]

CITIZENSHIP: U.S. Citizen
 International Citizen of: _____
 Resident Alien
 Non-Resident Alien, Visa type: _____

EMPLOYMENT INFORMATION

Current Employer _____ Dates of Employment _____

Street Address _____ City _____ State _____ Zip _____

Job Title _____ Name of Supervisor _____

Previous Employer _____ Dates of Employment _____

Street Address _____ City _____ State _____ Zip _____

Job Title _____ Name of Supervisor _____

EDUCATION INFORMATION

Undergraduate College(s):

1. Institution _____ Location _____

Dates Attended _____ Credits _____ Degree _____ Major _____

2. Institution _____ Location _____

Dates Attended _____ Credits _____ Degree _____ Major _____

Graduate College(s):

1. Institution _____ Location _____

Dates Attended _____ Credits _____ Degree _____ Major _____

2. Institution _____ Location _____

Dates Attended _____ Credits _____ Degree _____ Major _____

REFERRAL

Please indicate how you learned about Endicott College's graduate programs:

- Internet Search
- Word of Mouth
- Print Advertisement
- Information Session
- Website
- Past or Current Student
- Radio Advertisement
- Family/Relative
- Endicott employee
- Endicott mailing
- Other _____

RACE AND ETHNICITY Optional Information*

- Non-resident Alien
- Asian
- White
- Hispanic/Latino
- Black or African American
- Two or more races
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander
- Race and Ethnicity Unknown

* These questions are being asked to furnish statistics, as required by the Department of Education

I hereby make application for the herein named student and agree to the fees, terms, and conditions as set forth in the *Graduate Catalog*. In consideration of the undertaking by the Van Loan School of Graduate and Professional Studies to process this form, the undersigned agrees that the furnished information on the application form, together with all information and materials of any kind received by the Van Loan School of Graduate and Professional Studies from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone, including the candidate and his or her family, except that the Vice President and Dean of the School of Graduate and Professional Studies may, for official purposes at his or her discretion, disclose any part or all thereof to such person or persons as required by the application law.

Signature of Applicant _____ Date _____

Please be aware that the Commonwealth of Massachusetts may change licensure requirements. Students are advised to contact the Massachusetts Department of Education for specific, current licensure requirements. Current licensure regulations may be accessed at www.doe.mass.edu

Endicott College is an affirmative action/equal opportunity employer and is committed to the principles of equal employment and complies with all federal, state, and local laws and regulations advancing equal employment. The College's objective is to employ individuals qualified and/or trainable for open positions by virtue of job-related education, training, experience, and qualifications without regard to sex, race, religion, color, age, physical disability, sexual orientation, national or ethnic origin or citizenship, veteran status, genetic information, pregnancy, or any other status protected by law.

Endicott College is accredited by the New England Association of Schools and Colleges.

ENDICOTT
COLLEGE

VAN LOAN SCHOOL OF
GRADUATE AND PROFESSIONAL STUDIES

1350 Belmont St., Williamsburg Square #101, Brockton, MA 02301-4430
FAX: 508.586.6448

CONFIDENTIAL RECOMMENDATION FORM

TO THE APPLICANT: Please complete the top section of this form and deliver or mail the form to the person who will write your recommendation.

TO THE REFERENCE: Please return this form, with your signature across the seal, to:
Jon L. Jenmarc, Inc. 1350 Belmont St. Williamsburg Square #101, Brockton, MA 02301-4430 or fax to 508.586.6448

TO BE COMPLETED BY THE APPLICANT

Last Name (Applicant) _____ First Name _____ Middle Initial _____

Date of Birth _____ Undergraduate Program Graduate Program in _____

Name of Reference _____

Title of Reference _____

Relationship to the Applicant _____

I understand that this recommendation is to be used and maintained in confidence by Endicott College, Van Loan School of Graduate and Professional Studies. I hereby waive any and all rights to access this recommendation, under the Family Education and Privacy Act of 1974.

I agree to waive access I do not agree to waive access

Applicant's Signature _____

Date _____

TO BE COMPLETED BY THE REFERENCE

The person whose name appears above is seeking admission to Endicott College. Your candid assessment is an integral part of the Admission evaluation of the candidate. Your interest and assistance is much appreciated. Please complete this form and send it directly to Endicott College.

How long have you known the applicant, and in what capacity?

Currently, what is your relationship with the applicant?

Please give us your appraisal of the applicant in terms of the qualities listed below. Rate the individual relative to others in his or her peer group.

	Superior	Excellent	Good	Average	Below Average	Unable to Judge
Interpersonal Skills/Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation/Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for Career Advancement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the applicant's greatest strengths and talents?

In what areas can the applicant improve?

How would you assess the applicant's potential for success at Endicott College?

Is there anything else that you want to share about the applicant that you think would be helpful in our evaluation?

Overall: Strongly Recommend Recommend Recommend with Reservation Do Not Recommend

Reference's Signature

Reference's Name

Business Phone

E-mail

Company Name

Company Address