



ST. JOHN'S UNIVERSITY

ST. JOHN'S COLLEGE OF LIBERAL ARTS AND SCIENCES

Office of the Postgraduate Professional Development Programs

Postdoctoral Certificate Programs in Forensic Psychology Application

Please submit the following items to: Rafael Art. Javier, Ph.D., ABPP, St. John's University, Office of Postgraduate Professional Development Programs, Marillac Hall 402B, 8000 Utopia Parkway, Queens, NY 11439, 718-990-5640.

(Please note that returning students who have completed the foundational program only need to submit the application and deposit.)

- C.V. with relevant professional experiences (including titles, descriptions of activities and dates)
- Verification of degree (copy of diploma, if not yet licensed)
- Copy of psychology license and registration
- Copy of transcripts or other documents showing training in forensic psychology (if applying for advanced status)
- Non-refundable application fee

Please type or print clearly:

Social Security Number (Optional)

Date of Birth (Month/Day/Year)

I am applying to:

- Foundational Certificate Program
- Advanced Certificate Program in Criminal Law
- Advanced Certificate Program in Civil/Family Law

Applicant's Last Name (Surname)

First Name (Given Name)

Middle Name

Address (Number and Street Address)

Apartment No.

City

State/Province Zip/Postal Code

Country

Home Telephone (Include Area Code)

Work Telephone (Include Area Code)

E-mail Address

Gender Male Female

Have you previously attended St. John's University: Yes No

If yes, under what name?

Ethnic Origin (Optional)

- Asian or Far East
- Indian Subcontinent
- Pacific Islander
- Black, African-American
- Black, Caribbean/West Indian
- Black, African
- Arab, N.African, Middle East
- Caucasian
- Hispanic, Cuban
- Hispanic, Mexican
- Hispanic, Other
- Native American or Alaskan
- Other (specify)

Religious Background (Optional)

- | | | | |
|--------------------------------------|------------------------------------|---|---|
| <input type="radio"/> Roman Catholic | <input type="radio"/> Lutheran | <input type="radio"/> Russian Orthodox | <input type="radio"/> None |
| <input type="radio"/> Jewish | <input type="radio"/> Methodist | <input type="radio"/> Seventh-Day Adventist | <input type="radio"/> Non-Denominational |
| <input type="radio"/> Baptist | <input type="radio"/> Mormon | <input type="radio"/> Muslim | <input type="radio"/> Other (please specify): |
| <input type="radio"/> Episcopal | <input type="radio"/> Presbyterian | <input type="radio"/> Buddhist | |
| <input type="radio"/> Greek Orthodox | <input type="radio"/> Protestant | <input type="radio"/> Hindu | |

Highest Degree Obtained

Name of college/university

City

State

From (Month/Year)

To (Month/Year)

License

License #	Date	State of License	Registration #	Expiration Date
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Previous Dismissal or Suspension

Have you ever been disciplined for misconduct, suspended, expelled, or required to withdraw from any secondary or postsecondary educational institution? If yes, please explain on a separate sheet of paper. Yes No

Have you been convicted of a felony? If yes, please explain below. Yes No

Your Signature

I, the undersigned, hereby apply for admission to St. John's University. If accepted, I agree to abide by all the rules and regulations of the University, including those set forth in the University bulletins. All information contained herein is, to the best of my knowledge, true and complete. (Any omission or falsification of records is grounds for dismissal.)

Signature

Date (Month/Day/Year)