MA Excellerate Application

Leat Name	Final Name	Terror			Middle Name		
Last Name	First Name	i list ivallie			Wilder Name		
Mailing Address							
City			State			Zip	
Home Phone			PO Email				
Home Phone Cell Phone							
Current B.A. Program							
Please select the Master of A	Arts program	you would	l like	to pursu	e		
M.A. Human Development		M.A. Marriage and Family Therapy (MFT)					
O Early Childhood Education and Development O Social Change		M.A. Marriage and Family Therapy, Latinx Family Studies (LFS)					
O Leadership in Education and Hu	man Services	Fam	ily Studi	es (LFS)			
				ge and Famil ies (AAFS)	y Therapy, Af	rican American	
M.A. Organizational Leadership a	M.A. Marriage and Family Therapy, Trauma Studies						
M.A. Early Childhood Education				_			
O Generalist		M.A	. Marria	ge and Famil	y Therapy, LO	BTQIA+ Studie	25
O Trauma Studies							
O Organizational Leadership and N	lanagement						
I certify that, to the best of my kr Signature How to submit: To finalize an appli (registraroffice@pacificoaks.edu) vi	cation, the follow						Date
1. The completed application.							
 Two letters of recommendation Personal statement. 	from Pacific Oa	ks faculty.					
Approval from B.A. Dean or Prog	ram Lead						
Title and School		Signature					Date
Approval from M.A. Dean or Prog	ram Lead						
		Signature					Date

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