



UNITED STATES INTERNATIONAL UNIVERSITY

DOCTORATE IN CLINICAL PSYCHOLOGY (PSY.D) APPLICATION FORM

READ THE APPLICATION INSTRUCTIONS BEFORE COMPLETING THIS FORM

COMPLETE ALL APPROPRIATE SECTIONS IN CAPITAL/BLOCK LETTERS AND RETURN WITH SUPPORTING DOCUMENTS (See Checklist on Page 2) TO:

USIU Admissions Office
P.O. Box 14634 - 00800
NAIROBI, KENYA
Tel: [+254-020] 3606 000/3606 300
Fax [+254-020] 3606 100
Email: admit@usiu.ac.ke
Web: www.usiu.ac.ke
Facebook: USIU-Admissions

AFFIX RECENT PASSPORT SIZE PHOTOGRAPH HERE

Form with checkboxes for Mr/M/s and fields for Last, First, Middle names.

Other Name(s)/Maiden name, if any _____

Current Mailing Address

Table with fields for Street Address, P.O. Box Number, City/Town, State/Province, Zip/Postal, Country, Daytime Phone, Evening Phone, Fax Number, E-mail.

Personal Information

Table with fields for Date of Birth (Month, Day, Year), Female, Male, Place of Birth, Citizenship, Marital Status, National Id no., Passport No.

Next of Kin details (Indicate Emergency Contact in Nairobi)

Form with fields for Name, Address, Fax, Telephone, Email.

EDUCATION

PLEASE LIST ALL UNIVERSITIES ATTENDED IN THE FOLLOWING SECTIONS.

NAME OF UNIVERSITY	CITY & COUNTRY	YEARS ATTENDED	No. of YEARS SPENT	NAME OF DIPLOMA/ DEGREE AWARDED
		to		
		to		
		to		

If employed State:

COMPANY NAME	POSITION (TITLE)	DURATION
_____	_____	_____

ATTESTATION

I hereby certify that the information given in this application is correct and complete to the best of my knowledge, and hereby give my permission to the Admissions Office to obtain any verification deemed necessary to process my application. I further certify that I will arrange for the forwarding of official transcripts as requested in the instructions, and that such transcripts become the property of the university and will neither be forwarded to another institution not returned to me. Finally, I acknowledge that completing an application form does not guarantee admission.

Signature _____ Date _____

IT IS MANDATORY TO SIGN YOUR APPLICATION FORM BEFORE RETURNING IT TO USIU

APPLICATION CHECKLIST

Have you provided the following?

- Complete and signed application form (**Please observe deadline**).
- Non-refundable Application Fee (**KShs. 3,000 or US\$ 50**) – No Cash Payments.
 See Bank account details on the website www.usiu.ac.ke
- Official degree transcripts for Bachelors and Masters Degrees attained.
- Official/Original and Copy of the Degree Certificates (**Originals will be returned**).
- A curriculum vitae/resume.
- One (1) recent passport size photograph (write your name on reverse side).
- Copy of National Identity (ID) Card or National Passport.
- Completion and submission of the Graduate Record Examination (GRE) Entrance Exam Scores.
- A biographical letter, including your past achievements, and reasons you wish to pursue this degree.
- An academic writing sample of eight to ten pages, include references, APA style.
- Three (3) letters of recommendation from current or past supervisor, or former lecturers or other professionals in the mental health field. (**Recommenders must have known the applicant for at least two (2) years**).
- Interview with Psychology faculty, scheduled after Admissions receives your application.

NOTE: * ONLY COMPLETED APPLICATIONS WILL BE PROCESSED and USIU RESERVES THE RIGHT OF ADMISSION