

Department of Psychology and School of Kinesiology & Health Science Graduate Diploma Program in Health Psychology Application Form

Applicant Name: _____

Name of current supervisor (or faculty advisor):

Currently enrolled as a graduate student in (check one):

Graduate Program in Kinesiology and Health Science Graduate Program in Psychology

Current year of study (e.g., PhD 1):

1. Title of defended Master's thesis:

2. Title or topic of your dissertation:

Please email application materials in a single pdf file to the Graduate Diploma Program Coordinator.

Checklist of application materials (check enclosed items):

A letter that describes your interests in health psychology and your career plans (up to one page, single-spaced).

A Curriculum Vitae that includes information about any scholarships and academic awards, research experience, and publications and conference presentations.

A copy of your undergraduate academic transcript(s) (official copy not required).

An up-to-date copy of your graduate academic transcript(s) (official copy not required).

A letter of recommendation from a member of York's Faculty of Graduate Studies outlining your academic abilities, written and oral communication skills, and evidence for future success as a health psychology researcher (email to Graduate Diploma Program Coordinator or include in this application).

Completed Diploma Requirements Checklist

Please accept my completed application to the Graduate Diploma Program in Health Psychology.

Please obtain the signature of the Graduate Program Director below:

I am aware that ______ is submitting an application to the Graduate Diploma Program in Health Psychology at York University and I support the application.

Name of Graduate Program Director (please print)

Signature of Graduate Program Director

Date (dd/mm/year)

For office use only: Materials received: (please check)

> Application form Letter from student Curriculum Vitae Undergraduate transcript(s) Graduate transcript(s) Letter of recommendation Completed Diploma Requirements Checklist

Admission Committee decision:

Admit	
Reject (reason:)
Postpone (reason:)

Name of Graduate Diploma Program Coordinator Signature

Date (dd/mm/year)