Greetings!

Thank you for your inquiry concerning the Doctoral Program in Leadership Studies (DPLS) at Gonzaga University.

We hope that the enclosed materials will help give you a flavor of our culture and a positive expectation of what doctoral studies at Gonzaga may hold in store. If you do decide to apply to our program, please make sure that you complete the following checklist:

1. A 500-word (or less) narrative describing your motivations and purpose behind applying to our program. What do you hope to learn, achieve, or affect in your doctoral studies at Gonzaga?
2. A short sample of other writing you have done.
3. A current CV or resume.
4. Two official transcripts from each college or university you have attended.
5. Three letters of recommendation.
6. A completed application form.
7. Official MAT or GRE scores.
8. $50 non-refundable fee. (Please make a check out to “Gonzaga University.”)
9. If you are an international student, please complete and include a Financial Declaration form, additional financial documentation, and copy of passport picture page.

We also expect potential students to complete a 360-degree interview with the department chair and/or other faculty in the program. We love meeting people face-to-face, but we also do telephone and Skype calls for our initial conversations.

For more information about admissions, go to: gonzaga.edu/DPLSapplication. We also recommend that you take a closer look at our website: gonzaga.edu/doctoral. Please check out course syllabi, our conceptual framework, past dissertations, schedules, faculty, bios, and so on.

If you have any further questions, please let me, or the DPLS program coordinator, know.

Respectfully,

JoAnn Barbour, Ph.D.
Associate Professor of Leadership Studies
Chair, Doctoral Program in Leadership Studies
509-313-3630

Program Coordinator
509-313-3485

Mail or fax application materials to:
Doctoral Program in Leadership Studies
502 E Boone Ave
MSC Box 2616
Spokane, WA 99258-2505
Attention: Admissions
Fax: 509-313-3463
# ADMISSIONS APPLICATION

Doctoral Program in Leadership Studies

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<thead>
<tr>
<th>Applicant Name</th>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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<td>Former/Other Names Used</td>
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<th>Female / Male / Not Available</th>
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<td>Country of Residence</td>
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Complete the following as applicable:

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<td>Fax #</td>
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<tr>
<th>Ethnicity (circle one)</th>
<th>Asian American / Black American / Hawaiian/Pacific Islander / Caucasian (White, Non Hispanic) / Hispanic / Native American or Alaskan / Multiethnic / Unknown / Foreign Student / Prefer Not to Provide</th>
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<th>Mailing Address</th>
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<th>Desired Beginning Term</th>
<th>Fall Year</th>
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<th>Summer Year</th>
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| Have you ever attended Gonzaga University? (circle one) | No / Yes | If yes, when? |

1 Admissions Application
**List of Colleges and Universities Attended**

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<th>Name</th>
<th>City/State/Zip</th>
<th>From/To</th>
<th>Degree &amp; Date Received</th>
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**Employment History** *(begin with most recent)*

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Supervisor Reason for Leaving

Work Responsibilities

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Supervisor Reason for Leaving

Work Responsibilities

2 Admissions Application
Given the Mission of Gonzaga University (found at gonzaga.edu/about/mission/MissionStatement.asp) and the campus spirit we try to create, we ask whether you have ever been convicted of a crime or have a case pending against you at this time.

(circle one) No / Yes If yes, please explain:

In Case of Emergency, Please Notify

Name ___________________________________________ Phone ________________________________

Address ___________________________________________ Relation to You ______________________

Equal Opportunity Policy

Gonzaga University is an equal opportunity, affirmative action University. The University does not discriminate against any person on the basis of race, religion, sex, national origin, age, marital or veteran status, sexual orientation, a physical or mental impairment that substantially limits a major life activity, or any other non-merit factor in employment, educational program, or activities that it operates.

All University policies, practices, and procedures are consistent with Gonzaga’s Jesuit, Catholic identity and Mission Statement, and comply with federal and state regulations, including Sections 503 and 504 of the Rehabilitation Act of 1973 and Title IX of the Education Amendments of 1972.

504 Policy

Federal law prohibits us from making preadmission inquiry about disabilities. Information regarding disabilities, voluntarily given or inadvertently received, will not adversely affect any admission decisions. If you require special services because of a disability, you may notify the Dean of Students’ Office. This voluntary self-identification allows Gonzaga University to prepare appropriate support services to facilitate your learning. This information will be kept in strict confidence and has no effect on your admission to the university.

Applicant Signature ___________________________ Date ________________

Mail or fax application materials to:
Doctoral Program in Leadership Studies
502 E Boone Ave
MSC Box 2616
Spokane, WA 99258-2505
Attention: Admissions
Fax: 509-313-3463
CONFIDENTIAL RECOMMENDATION
Doctoral Program in Leadership Studies

Part 1 (to be completed by applicant)

Applicant Name

__________________________
Last

__________________________
First

__________________________
Middle Initial

SSN (disregard if international applicant)

__________________________

I understand that Federal Law, through the Family Education Rights and Privacy Act of 1974, provides me with the right to access to this recommendation and that no school may require me to waive that right.

I hereby ☐ waive ☐ do not waive my right to access this recommendation.

________________________________
Applicant Signature

________________________________
Date

Part 2 (to be completed by the person acting as a reference for the applicant)

Your Name

__________________________
Title/Position

Organization

__________________________
Phone

Address

__________________________
Email

Signature

__________________________
Date

In order to help evaluate this applicant’s qualifications for graduate study, your opinion is requested. Please print neatly or type and return it directly to the address located at the bottom of this form.

1. How long (in years) and under what circumstances have you known the applicant?

________________________________

________________________________

________________________________
2. Give your appraisal of the applicant in terms of the qualities listed below. Rate the applicant in comparison with other individuals whom you have known in similar circumstances.

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<th>Quality</th>
<th>Top 5%</th>
<th>Top 15%</th>
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3. Using the space provided, please elaborate upon the ratings you have made above and offer any additional information that will be helpful to us in considering this applicant for admission to graduate school. Please comment on the applicant’s strengths and limitations.

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4. Please indicate your overall endorsement of the applicant.

☐ I strongly recommend the candidate for admission.
☐ I recommend the candidate for admission.
☐ I recommend the candidate with some reservation.
☐ I do not recommend the candidate for admission.

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CONFIDENTIAL RECOMMENDATION
Doctoral Program in Leadership Studies

Part 1 (to be completed by applicant)

Applicant Name ____________________________________________________________

Last          First          Middle Initial

SSN (disregard if international applicant) ______________________________________

I understand that Federal Law, through the Family Education Rights and Privacy Act of 1974, provides me with the right to access to this recommendation and that no school may require me to waive that right.

I hereby □ waive □ do not waive my right to access this recommendation.

Applicant Signature ___________________________ Date __________________________

Part 2 (to be completed by the person acting as a reference for the applicant)

Your Name __________________________________________ Title/Position __________

Organization ______________________________________ Phone ____________________

Address __________________________________________ Email _____________________

Signature ___________________________ Date __________________________

In order to help evaluate this applicant’s qualifications for graduate study, your opinion is requested. Please print neatly or type and return it directly to the address located at the bottom of this form.

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To obtain the most up-to-date DPLS catalogue,

1. Go online to www.gonzaga.edu/catalogues

2. Click on “Graduate Catalogue”

3. Scroll down and click on “Doctor of Philosophy in Leadership Studies” (under The School of Professional Studies)