## Department of Counselor Education Written and Specialization Qualifying Examinations Application

Instructions Complete the following demographic information and the appropriate section of the application form, depending on whether you are applying for the Written Qualifying Examination or the Written Specialization Examination or Paper Student Name UFID Mailing Address UF Email \_\_\_\_\_ Phones (H) \_\_\_\_\_ (W) \_\_\_\_ (C) \_\_\_\_ Written Qualifying Examination Application Date of Trial One of the Counselor Education Examination if completed Date of Trial Two of the Counselor Education Examination if completed Dates Current Trial of the Examination is scheduled Check the Exam Section(s) and check the Trial to be taken on the Current Trial of the Examination.  $\Box$  Theory – Trial  $\Box$  1  $\Box$  2  $\Box$  3  $\Box$  Research – Trial  $\Box$  1  $\Box$  2  $\Box$  3 □ Practice – Trial □ 1 □ 2 □ 3 □ Policy – Trial □ 1 □ 2 □ 3 I will complete this Current Trial of the Examination at the following location Phone On my honor, I will neither give nor accept unauthorized aid in composing my answers to the questions asked on this examination. Student Signature Date Doctoral Supervisory Committee Chair Signature Date Graduate Coordinator Signature Date

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## Written Specialty Paper or Written Specialty Examination Application

Have you completed successfully	the Written	Counselor	Education Qualifying
Examination Requirement?	□ YES	🗆 NO	

Select One D Specialty Critical Review Paper

□ Counselor Education Specialty Examination

If Paper, identify the topic of the Critical Review Paper

If Examination, Date of Specialty Examination

Doctoral students completing the Specialty Examination should consult with their committee chairperson regarding the development of examination questions.

I will complete this Specialty Paper/Examination at the following location

Phone

On my honor, I will neither give nor accept unauthorized aid in composing my answers to the questions asked on this examination.

Student Signature	Date	
Doctoral Supervisory Committee Chair Signature	Date	
Graduate Coordinator Signature	Date	