**Graduate Writing Residency Program Application Spring 2015**

**Center for Excellence in Graduate Education**

Student Information

Name: Student ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:

 Street City State Zip

Email: Telephone:

 Area Code Number

Name of Graduate Program:

Degree Objective (Check One):

\_\_\_\_\_ MA \_\_\_\_\_ MS \_\_\_\_\_ MBA \_\_\_\_\_ MPA \_\_\_\_\_EdD

Date Admitted to the Program (Fill in Both):

Term: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thesis/Project/Dissertation Advisor:

Thesis/Project/Dissertation Topic:

Stage of Thesis/Project/Dissertation Development (**Check One** – Most Appropriate):

 \_\_\_\_\_ General Topic Identified

 \_\_\_\_\_ Specific Topic Identified, Approved by Advisor, and Ready to Begin Writing

 \_\_\_\_\_ Organizing/Outlining and Early Writing of Proposal

 \_\_\_\_\_ Nearing Proposal Submission

 \_\_\_\_\_ Proposal Approved and at Data Analysis, Early Drafting of Results and

 Discussion, and/or Early Drafting of Final Manuscript

 \_\_\_\_\_ Drafting for Final Submission/Defense/Approval

I am confident in my research/scholarly writing skills (**Check One** – Most Appropriate):

 \_\_\_\_\_ Strongly Disagree

 \_\_\_\_\_ Somewhat Disagree

 \_\_\_\_\_ Neutral

 \_\_\_\_\_ Agree Somewhat

 \_\_\_\_\_ Strongly Agree

Personal Statement:

Please address the following questions in approximately 200 words (total).

a. *Why do you wish to participate in the Writing Residency Program?*

b. *What do you want to accomplish by completing the Writing Residency Program?*

**Affirmative Action Information (Optional)**

Check All That Apply:

\_\_\_\_\_ American Indian or Alaskan Native \_\_\_\_\_ Hispanic or Latino \_\_\_\_\_ Other

\_\_\_\_\_ Asian \_\_\_\_\_ Native Hawaiian or Pacific Islander

\_\_\_\_\_ Black or African American \_\_\_\_\_ White

# Commitment Statement

I understand that the CEGE Graduate Writing Residency Program is free to all graduate students enrolled in a master’s or doctoral program at CSU Stanislaus. I understand space is limited and available on a first come, first served basis. Upon registration, I agree to commit to participation in the entire 4-session module. If after registration I decide that I cannot commit to the entire module, I will contact the CEGE office (209-664-6773 or CEGECenter@csustan.edu) as soon as possible so that other students wishing to participate may be informed of the available seat.

**Signature indicating agreement with the above statement.**

**Applicant:**

Print Name **\***Signature Date

**\*Note that if you do not have a scanner, applications submitted from your email account will replace the need for a signature. However, in the body of your email you must acknowledge that you agree to this commitment statement.**

Submit your application to CEGE by **Wednesday, March 18, 2015, 5:00 p.m.**

Applications are only accepted electronically at CEGECenter@csustan.edu. Spaces are available on a first come, first served, basis. Once registered, further information will be provided.

**Direct questions to:**

The Center for Excellence in Graduate Education

MSR 160

(209) 667-3493

**CEGECenter@csustan.edu**