

Applied Behavior Analysis (ABA) Certificate Application

COLLEGE OF EDUCATION
+ HUMAN DEVELOPMENT

UNIVERSITY OF MINNESOTA

CEHD STUDENT SERVICES / 110 WULLING HALL, 86 PLEASANT STREET S.E., MINNEAPOLIS, MN 55455 / 612-625-6501, FAX: 612-626-1580

Application instructions

Applicants to the applied behavior analysis (ABA) certificate program must submit the following application materials:

- Completed application form
- Official transcripts from all postsecondary institutions you have attended or are currently attending, except the University of Minnesota. Transcripts must be received from the issuing school in a sealed and stamped envelope.
- One-page typed goal statement

- Two letters of recommendation from individuals who can address the applicant's ability to work with populations that could benefit from the use of ABA techniques

Send application materials in one packet to the following address:

Applied Behavior Analysis (ABA) Certificate Admissions
CEHD Student Services
110 Wulling Hall
86 Pleasant Street S.E.
Minneapolis, MN 55455
Fax: 612-626-1580

1. Name Last First Middle		2. Former name * (see instructions below) _____	
3. Current address _____ Street _____ City State ZIP code			
4. Home phone ()	5. Cell phone ()	6. Work phone ()	
7. Preferred e-mail address (if applicable)			
8. Permanent address _____ Street _____ City State ZIP code			
9. State in which you claim legal residency		How long: ____ Years ____ Months	
10. University of Minnesota Student I.D. Number (if applicable) or Social Security number			
11. Country of birth			
12. Country of citizenship <input type="checkbox"/> United States <input type="checkbox"/> Other (must specify)			
13. Postsecondary education			
_____ Institution	_____ Major	_____ Degree earned	_____ Date of graduation
_____ Institution	_____ Major	_____ Degree earned	_____ Date of graduation
_____ Institution	_____ Major	_____ Degree earned	_____ Date of graduation
_____ Institution	_____ Major	_____ Degree earned	_____ Date of graduation

* Students who have previously applied to any of the University of Minnesota system schools (Twin Cities, Crookston, Duluth, Morris, or Waseca) under a different name must submit a completed University of Minnesota Name Change Request form to the appropriate office. The form is available at the One Stop Student Services, 612-624-1111, or on the Web: <http://onestop.umn.edu/forms/index.html>.

Application continues on next page.

14. Current University of Minnesota status (if applicable)

College

Major area of study

Faculty adviser

Anticipated degree (B.S., B.A., M.Ed., M.A., Ph.D., etc.)

Anticipated graduation date

CE+HD
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cehdgrad@umn.edu
<http://cehd.umn.edu>

*The University of Minnesota is an equal opportunity educator and employer. The College of Education and Human Development is committed to recruiting, enrolling, and educating a diverse population of students who represent the overall composition of our society.
For alternative formats of this publication, please contact CEHD Student Services, 612-625-6501, cehdgrad@umn.edu.*