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|  | C:\Users\dibened2\AppData\Local\Temp\Temp1_Horizontal.zip\Horizontal\Career Services Logo.pngGraduate College (1) Post-Graduate Career PathwaysProgram Application Cover Sheet |

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| Applicant Information | |
| First Name:       Last Name:       NSHE ID: | |
| Department:       Degree Plan:       Rebelmail: | |
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| Program Requirements | |
| I understand that I need to:   * Attend a minimum of 4 workshops * Attend a 1:1 goal setting meeting with an assigned employer * Attend 1 day of Job Shadowing with an assigned employer * Meet with a Career Counselor to have your resume reviewed * Complete an interview for an internship and get individualized feedback on your interview skills from the employer. * Attend all four mandatory cohort meetings * Submit the *Post-Graduate Career Pathways Program Workshop Attendance Form* in both the fall and spring   Semesters and the *Post-Graduate Career Pathways Program Completion Form* in the spring semester   * Submit a reflection paper on-time and present it at the Final Cohort Meeting * Complete all program assessment surveys | |
| Application Materials | |
| Cover sheet that is filled out completely and signed and dated  CV or resume  One page, single-spaced maximum letter of interest (please see website for additional details) | |
| Academic Standing | |
| I understand that if admitted to the Post-Graduate Career Pathways Program, I must remain in good academic standing in my  department and with the Graduate College. Failure to do so will result in removal from the program. | |
| Student and Faculty Signatures | |
| Graduate students are required to have their faculty advisor and graduate coordinator/department chair approve their participation in the Post-Graduate Career Pathways Program. All signatures certify that the information on this form is accurate and that all parties involved agree to the terms and conditions of this program.   |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | | Student (Type Name) |  | Virtual Student Signature accepted for 2020-20201 application | Date |  |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | | Faculty Advisor (Type Name) |  | Virtual Faculty Advisor Signature accepted for 2020-20201 application | Date | |  |  |  |  | | Graduate Coordinator / Department Chair (Type Name) |  | Virtual Graduate Coordinator / Department Chair Signature accepted for 2020-20201 application | Date | | |

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| **GRADUATE COLLEGE USE ONLY** |  |
| Cumulative GPA:       Good Standing:  Yes  No Admit to Program:  Yes  No | |
| **COMMENTS:**  MyUNLV Service Indicator Added  Welcome and Enrollment Invitation Sent **Code**: 83 | |