



FLORIDA ATLANTIC UNIVERSITY

Graduate College

For Admissions Staff Only

CODE

RES

TERM

ADMISSION DECISION

FORM 4

All Information Must Be Typed

Student's Name: _____ Z Number: _____
First MI Last

☐ Doctorate ☐ Specialist ☐ Master ☐ Combined Program/Advance Standing Expected Term of Enrollment: _____

Major: _____ College: _____ Department: _____

GPA: _____ GRE/GMAT: _____ TOEFL: _____

I. Decision:

- ☐ Denied
☐ No Decision (Incomplete Supplemental Docs.)
☐ Fully Accepted (No conditions or stipulations)

Conditionally Accepted (Indicate condition(s) or stipulations in the box below)

Global Academic Track Conditional Accepted (Indicate condition(s) or stipulations in the box below)

Conditions Met; Updated to Fully Accepted

Admission Decision Based on a Request to Waive a University Requirement:

- ☐ Waive GRE (No Score, Low Score, Old Score) ☐ Waive GMAT (No Score, Low Score, Old Score)
☐ Waive Low GPA ☐ Waive GRE (or GMAT) and Low GPA
☐ Other (Submit Form 10 with this form): _____

II. Financial Assistance: This form may be submitted prior making a decision regarding financial assistance. Please note, the information requested below is necessary to complete the I-20 for international students.

- ☐ Not Offered
☐ Undecided or Unknown: Please provide the Graduate College with the financial assistance information once a decision has been made by email (include student's full name and Z number). It is not necessary to resubmit this form.
☐ Financial Assistance Offered

Assistantship: \$ _____

Funding Source(s): _____

Is this a Teaching Assistantship?

Tuition Benefits: \$ _____

☐ Yes ☐ No

Other: \$ _____

Is the financial report support available in the summer? ☐ Yes ☐ No Is the financial support renewable? ☐ Yes ☐ No

Graduate Program Chair or Department Chair (Please Type)

Date