

APPLICATION FOR GRADUATE STUDY IN ENVIRONMENTAL SCIENCES

FLORIDA ATLANTIC UNIVERSITY

LAST NAME _____ FIRST NAME _____ MI _____

BIRTH DATE _____

HOME ADDRESS _____ COUNTRY _____

CITY _____ STATE _____ ZIP CODE (Int'l Postal Code) _____

EMAIL ADDRESS _____

DAYTIME PHONE _____ EVENING PHONE _____

MASTERS DEGREE OPTIONS: Masters of Science (MS 36 hrs.)

Term in which you seek admission (Check One):

Spring Fall Year _____ Thesis Non-Thesis

For further explanation please refer to the graduate catalogue.

Please indicate the name(s) of the professor that will be your sponsor and remind him/her to write a letter on your behalf.

***NOTE:** It is your responsibility to contact potential faculty advisors related to your research interest via e-mail or phone. Your file will not be considered without faculty sponsorship. If you need help finding a sponsor, contact the Director or Assistant.

Indicate two anticipated areas of interest (these choices are not binding).

___ Animal Behavior	___ Physiology	___ Freshwater Tropical Ecology
___ Biotechnology	___ Conservation/Restoration	___ Geographic Information Systems
___ Botany	___ Microbiology & Molecular	___ Remote Sensing
___ Ecology	___ Marine Tropical Ecology	___ Chemistry
___ Zoology	___ Terrestrial Tropical Ecology	___ Biochemistry

Give a brief explanation of research experience you have in those areas indicated.

Please complete the following:

GRE Score: *Verbal _____ *Quantitative _____ Analytical _____

Date GRE taken _____ Date to be taken _____

*You must have a total combined score of 1000 in the verbal and quantitative sections.

GPA (Undergraduate) _____ (last 60 hours) Hours _____

GPA (Graduate) _____ Hours _____

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All international students should contact the office of International Student and Scholar Services once you have been accepted into the university and an I-20 has been issued. Additional inquiries relating to student-visas, scholarships, forms, etc. please call 1 (561) 297-3049, Fax number 1 (561) 297-2446.

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-1. Rtqi tco "Application *j k'f qewo gpv+
.....2. A statement of Research Interests/Career Objectives
.....50 Copies of Transcripts from All Universities Attended

....."I certify that the information given in this application is complete and accurate. Should
.....any of the information I have given change prior to my entry into the Environmental Sciences
.....Program, I will immediately notify the Director.

....."Signature _____ Date _____

....."Please call or email the Environmental Sciences Program to make sure that all your
.....f qewo gpw'j cxg'been received and ctg'tgcf { for the Environmental Sciences Cf o kulkpu"
.....Committee to review. This will help us to expedite the application process for your acceptance.

Telephone: 1 (954)236-1267 "Email: Cynthia Berman-Gruen at cberman2@fau.edu
"For additional information regarding our program, please visit our web-site at "
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For Environmental Graduate Committee Use Only

ACCEPTANCE:

FULL _____ CONDITIONAL _____ DENIED _____

ASSISTANTSHIP AWARDED:

TA _____ RA _____

COMMENTS AND RECOMMENDATIONS BY COMMITTEE:

COMMITTEE CHAIR SIGNATURE _____

DATE _____