

APPLICANT DATA SHEET

APPLICATION INFORMATION			
Applicant Name:			Check one of the following: <input type="checkbox"/> U.S. Citizen/Permanent Resident <input type="checkbox"/> International Applicant/Non U.S. Citizen
Last/Family Name	First Name	Middle/Other Name	Type of Application (check one):
Other names in which transcript may be listed.			<input type="checkbox"/> Regular degree application
Social Security Number: _____			<input type="checkbox"/> Degree application from current UA senior applying for graduate degree in same field
Proposed Major: _____			<input type="checkbox"/> Degree application from current UA master's student applying for doctoral degree in same field
Specialty: _____			Place of Initial Enrollment: <input type="checkbox"/> On-Campus <input type="checkbox"/> Off-Campus <input type="checkbox"/> Gadsden <input type="checkbox"/> Overseas
Degree Sought: <input type="checkbox"/> Masters <input type="checkbox"/> MFA <input type="checkbox"/> DMA <input type="checkbox"/> PhD			Proposed Entrance Date: Year _____ Term: <input type="checkbox"/> August <input type="checkbox"/> January <input type="checkbox"/> May <input type="checkbox"/> June <input type="checkbox"/> July
<input type="checkbox"/> MBA <input type="checkbox"/> EdS <input type="checkbox"/> EdD <input type="checkbox"/> Other: _____			Entrance Examination: Type _____ Date Taken _____
			Approximate Overall Undergraduate GPA (based on a 4.0 scale): _____
			Have you previously applied to the UA Graduate School or taken graduate courses through continuing education at UA? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____

INFORMATION ABOUT THE APPLICANT:

Mailing Address: Street or Box Number _____

City _____ State _____ Zip/Postal Code _____ Country, if not USA _____

Telephone Number: Work () _____ Home () _____ Email _____

Permanent Address: _____ County of Origin: _____

Country of Citizenship: _____ Place of Birth _____ Date of Birth (month/day/year): _____

Have you resided, or will you have resided, in Alabama for the 12 month period immediately preceding the date you plan to enroll at UA? _____

INTERNATIONAL STUDENTS ONLY (Send proof of permanent resident status with this application, if applicable.)

If you are not a citizen of the United States, which type of visa do you have or expect to receive? _____ Student (F _____) (J _____) _____ Permanent Resident _____ Other _____

EMERGENCY CONTACT INFORMATION: Name: _____

Relationship to You: _____ Contact (Area Code) Telephone: _____

Contact Address: _____

LIST ALL UNDERGRADUATE AND GRADUATE OR PROFESSIONAL INSTITUTIONS ATTENDED:					<i>The institution should mail original transcripts directly to the Graduate School.</i>	
Name of Institution	City and State	Months/Year(s)-Attended From- To	Year Graduated	Degree Received	Major	

In what activities have you engaged since graduation? if employed, Please name and address of employer, title of position held, and dates employed. Do not send copies of publications and experience unless requested to do so. Please attach resume.

REFERENCES: *Original letters of reference should be sent directly to the department or program in which you plan to major. List at least three references who are qualified to describe your abilities and academic qualifications and ask them to send recommendation forms or letters.*

NAME	TITLE	ADDRESS

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR STATISTICAL PURPOSES AND INFORMATION

American Indian or Alaskan Native _____ Asian or Pacific Islander _____ African American _____ Hispanic _____ White Non-Hispanic _____ Other _____

Sex: Male _____ Female _____

FINANCIAL ASSISTANCE
If you wish to be considered for financial assistance, please contact the department in which you are applying.

I certify that the above information is correct and complete. I understand that admission to the Graduate School does not imply acceptance as a candidate for an advanced degree and that completion of graduate study in residence, other screening standards, and Graduate School procedures are necessary for acceptance as a degree candidate. I also have read the regulations of the Graduate School as contained in its catalog. I further certify that, if required, I have complied with the provisions of the United States Military Service Act by having registered with the Selective Service Board.

Date _____ Signature _____