

**APPLICATION FOR 6 G'hc'AG'89; F99  
ENVIRONMENTAL SCIENCE**

*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 \_\_\_\_\_

**DU'q'O UDEGREE OPTIONS:**

Term in which you seek admission (Check One):

Spring      Fall      Year \_\_\_\_\_      Thesis      Non-Thesis

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

\_\_\_\_\_

**POTE: 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.**

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

<input type="checkbox"/> Animal Behavior	<input type="checkbox"/> Physiology	<input type="checkbox"/> Freshwater Tropical Ecology
<input type="checkbox"/> Biotechnology	<input type="checkbox"/> Conservation/Restoration	<input type="checkbox"/> Geographic Information Systems
<input type="checkbox"/> Botany	<input type="checkbox"/> Microbiology & Molecular	<input type="checkbox"/> Remote Sensing
<input type="checkbox"/> Ecology	<input type="checkbox"/> Marine Tropical Ecology	<input type="checkbox"/> Chemistry
<input type="checkbox"/> Zoology	<input type="checkbox"/> Terrestrial Tropical Ecology	<input type="checkbox"/> Biochemistry

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

If you have specific skills applicable to research (e.g., laboratory experience, photomicrography, video recording, scuba diving, boat handling, museum techniques, use of computer packages, statistics, field techniques), please indicate them below:

Previous Universities or Colleges last attended:

Name	Dates	Major	Degree Earned

Membership in professional and honor societies; honors and awards:

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List names, addresses, and phone numbers of three referees you will ask to send letters of recommendation. (There are no special forms; all letters must be on letterhead).

Name	University/Company	Telephone	E-mail

**WRITE AND ATTACH A 1-2 PAGE STATEMENT OF YOUR RESEARCH INTERESTS AND CAREER OBJECTIVES. (THIS MUST BE TYPED – NO HANDWRITTEN STATEMENTS.)**

**TEACHING ASSISTANTSHIPS :** Chgt "f kwwukpi "cuukucpvuj kr "qr vkqpu"y kj "{ qwt"cf xkuqt."f q"{ qw" y cpv"q"dg"eqpukf gtgf "hqt" """"aaaaaaa "VC" "cv"j g"Dqec" Tcvqp"Eco r wu0" """"aaaaaaa VC"cv"j g"F cxkg'Eco r wu0 """"aaaaaaa "VC"cv"j kcp"Tkxgt'Eqmgi g"lp"HqtvRkgtg0" """"aaaaaaa "Tgugctej "Cuukucpvuj kr "qt"Hgmny uj kr "uwr r rkgf "d{ "{ qwt"cf xkuqt0" """"aaaaaaa "P q"cuukucpvuj kr "tgs wguvgf "cv"j ku"ko g0" ""

If you want an assistantship and it is not available, are you still interested in attending Florida Atlantic University? \_\_\_\_\_

**If you are an international student wanting a TA, please inquire with the International Student Office obtaining a social security card upon arrival at the university, 1 (561) 297-3049.**

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 \_\_\_\_\_

**Reminder:** [ qw'b wu'cr r r' 'v'j g'I t cf wcv'Eqngi g'qprpg'cv  
 .....j wr <ly y y hcv'gf wli t cf wcv'cr r r' qprpg'lpf gz'j r "  
 .....Qh'ekn't cpuet kr w'lt qo 'vj g'Tgi km ct 'qh'gcej 'eqngi g'qt 'wpl'kg'ul' { 'qw'j cxg'"  
 .....<w'gpf gf 'ct g'v'lg'lgpv'v'j g'I t cf wcv'Eqngi g<"  
 .....Hqt lf c 'Cv'pvl'Wpl'kg'ul' { ""  
 .....I t cf wcv'Eqngi g'"  
 .....UW: 2.'Tqqo '323'"  
 .....999'I rcf gu'Tqcf ""  
 .....Dqec 'Tcvqp.'HN'55653  
 ..

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.

.....Ugpf 'vj g'hqmy kpi "f qewo gpv'cu'go cki'cvcej o gpv'v'q'gpxktquek' hcv'gf w."  
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1. Rtqi tco "Application \*vj ku'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 information has been received and sent to the Environmental Sciences Cf o kulk'pu" 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](mailto:cberman2@fau.edu)

For additional information regarding our program, please visit our web-site at [www.fau.edu/EnvironmentalSciences](http://www.fau.edu/EnvironmentalSciences)

**For Environmental Graduate Committee Use Only**

**ACCEPTANCE:**

FULL \_\_\_\_\_ CONDITIONAL \_\_\_\_\_ DENIED \_\_\_\_\_

**ASSISTANTSHIP AWARDED:**

TA \_\_\_\_\_ RA \_\_\_\_\_

**COMMENTS AND RECOMMENDATIONS BY COMMITTEE:**

COMMITTEE CHAIR SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_