

This copy of the application, letters of recommendation, statement of purpose and photo copies of your transcripts and test scores must be mailed to your intended department. Please contact your department regarding other materials that may be required.

Department Contacts: <http://www.admissions.ufl.edu/grad/gradcontacts.html>

Name: Last/ Family/ Surname		First/ Given Name	Middle	UFID (if known): -	<input type="checkbox"/> Male <input type="checkbox"/> Female
Permanent Address: Street & Number				City	State
				Zip	Date of Birth: ____/____/____ Month Day Year
Current Address: Until ____/____/____		Street & Number		City	State
				Zip	
Phone Number: () -	Work Phone Number: () -	Fax Number: () -	E-mail Address:		

Nation of Citizenship: <input type="checkbox"/> United States <input type="checkbox"/> Other: _____	Place of Birth: City _____ State _____	Non-U.S. citizens only: Are you a permanent resident alien? <input type="checkbox"/> Yes; attach copy of both sides of your permanent resident alien card. <input type="checkbox"/> No; what visa do you presently hold? _____
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Anticipated Term/Year of Enrollment (select one):
 ___ Fall-August 200 ___ ___ Spring-January 200 ___ ___ Summer A/C-May 200 ___ ___ Summer B-June 200 ___

College: _____ Program: _____ Specialization: _____

Degree goal (specify one): ___ Master's ___ Specialist ___ Doctor ___ Engineer ___ PhD

Will you be a full-time student? ___ Yes ___ No; state other occupation: _____

Are you applying to a distant learning program? ___ Yes ___ No	Have you ever attended UF? ___ Yes ___ No
Are you applying to a joint-degree program? ___ Yes ___ No	Are you currently enrolled at UF? ___ Yes ___ No
A combined bachelor's/master's program? ___ Yes ___ No	

List all colleges or universities **you have attended**. Include the University of Florida if you have ever registered for a UF course.
 Other names that may appear on your transcripts: _____

Institution-- include city and state	Major	Dates of Attendance				List all Degrees and Dates			
		From Month Year	To Month Year	Degree	Earned	Will Earn	Month / Year		
		/	/				/		
		/	/				/		
		/	/				/		
		/	/				/		

Important: Use the worksheet on the back of the application to calculate your **self-reported GPA**. Enter the result here: _____

Are you applying as a Florida resident for tuition purposes? ___ Yes (Residency affidavit must be completed.) ___ No

Official scores must be sent to the University of Florida, Office of Admissions, PO Box 114000, 201 Criser Hall, Gainesville, FL 32611-4000.

Graduate Record Examination (GRE) results must be received directly from the Educational Testing Service. UF's institution code is 5812.

GRE Test Date: _____ Verbal: _____ Quantitative: _____ Analytical/Writing: _____ Total (V+Q): _____
GRE Subject Test – Test Date: _____ Test Name: _____ Score: _____

Graduate Management Admission Test (GMAT) results must be received directly from the Graduate Management Admission Council.

GMAT Test Date: _____ Verbal: _____ Quantitative: _____ Score: _____ Analytical/Writing: _____

Proficiency in the English language is required of applicants from countries (including Puerto Rico) where English is not the official language. These applicants must submit official scores from one of the tests listed below. This requirement may be waived if you have been enrolled in a degree seeking program for one academic year (in a country where English is the official language) prior to your anticipated term of enrollment at UF.

Test of English as a Foreign Language (TOEFL) results must be received directly from the Educational Testing Service. UF's institution code is 5812.

TOEFL Test Date: _____ Listening: _____ Writing: _____ Reading: _____ Score: _____
IB-TOEFL Test Date: _____ Reading: _____ Listening: _____ Speaking: _____ Writing: _____

International English Language Testing System (IELTS) results must be received from IELTS International.

IELTS Test Date: _____ Listening: _____ Reading: _____ Writing: _____ Speaking: _____ Score: _____

Michigan English Language Assessment Battery (MELAB) results must be received directly from the University of Michigan English Language Institute.

MELAB Test Date: _____ Composition: _____ Listening: _____ GCVR: _____

Completion of the University of Florida English Language Institute program. Send verification from UF English Language Institute.

Activities and Locations: Indicate how you spent or how you plan to spend all time, from graduation, until enrollment at the University of Florida. Use additional paper, if necessary.

Position/Activity	Location-- include city and state	From	To
		/ - /	/ - /
		/ - /	/ - /
		/ - /	/ - /

References: List below three references. Have these individuals send letters of recommendation directly to your department.

Recommendation forms are available at <http://gradschool.rgp.ufl.edu/education/recommendation.html>

Name and Position	Department /Institution	E-mail Address	Telephone
			() -
			() -
			() -

Identify any department or university personnel other than Office of Admissions staff with whom you have been in correspondence (include name, position and department): _____

Do you intend to apply for one of the following? Fellowship Scholarship Assistantship
For consideration, complete the application for graduate fellowship or assistantship and send it directly to the department.
Fellowship/Assistantship application available at <http://gradschool.rgp.ufl.edu/pdf-files/recommendation-letter-form.pdf>

To request any reasonable accommodation for a disability please contact the graduate coordinator in your department.

Department Contacts: <http://www.admissions.ufl.edu/grad/gradcontacts.html>

I will abide by the university's regulations concerning application deadlines and admission requirements. I certify that the information given in this application is complete and accurate and I understand that false or fraudulent statements within this application or residence statement may result in denial of admission, disciplinary action and invalidation of credits or degrees earned at the university. If admitted, I hereby agree to abide by the policies of the Florida Board of Education and the rules and regulations of the University of Florida Board of Trustees. Should any of the information I have given change prior to my entry to the university, I shall notify the University of Florida Office of Admissions immediately. I understand that the \$30 U.S. check or money order that must accompany this application is a nonrefundable fee.

Applicant's Signature

Date

All applicants who meet requirements and standards will be considered equally for admission to any academic program, regardless of race, color, religion, gender, marital status, beliefs, age, national origin, sexual orientation or physical or mental disabilities.