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**INTERNATIONAL STUDENT APPLICATION
 FOR ADMISSION TO GRADUATE DEGREE PROGRAMS**

1. If you have a U.S. Social Security number; list below:

U.S. Social Security number _____ - _____ - _____

2. Mr. Ms.
 Name:

Last Name First Name Middle Maiden Name

3. Mailing Address:

Street and Number City State Country Zip Code

4. Permanent Address:

Street and Number City State Country Zip Code

Telephone: _____ Fax: _____
 Country Code Number Country Code Number

5. Date of Birth: _____ / _____ / _____ E-mail: _____
 Month Day Year

Place of Birth: _____ Country of Citizenship: _____
 City Country

6. Native Language: _____ Marital Status: Single Married

7. Toward what graduate degree(s) at the University of Miami do you expect to work: M.A. M.F.A. M.M. M.S. M.S.B.E. M.S.C.E. M.S.Ed. M.S.E.E. M.S.I.E. M.S.M.E. M.S.N. M.S. M.S.O.E. Ed.S. D.A. D.M.A. Ed.D. Ph.D.

8. What is your intended major? Consult the international admission brochure for exact name and specific area of concentration.

Major	Area of Concentration (if applicable)
9. When do you wish to enter: <input type="checkbox"/> Fall Semester (August) <input type="checkbox"/> Spring Semester (January) Year _____ <input type="checkbox"/> 1st Summer (Session May) <input type="checkbox"/> 2nd Summer Session (June)	
10. If you are not a U.S. citizen, indicate the type of visa expected upon matriculation at the University of Miami: <input type="checkbox"/> Resident (R) <input type="checkbox"/> Parolee (P) <input type="checkbox"/> Student (F) <input type="checkbox"/> Exchange (J) <input type="checkbox"/> Diplomat (A) <input type="checkbox"/> Other: _____	
11. The Test of English as a Foreign Language (TOEFL) was/will be taken on: _____ date _____ Test score: _____ The Graduate Record Examination (GRE) was/will be taken on: _____ date _____ Test score: _____	
12. Have you ever attended the University of Miami: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, when: _____ Student Number: _____ Under what name (if applicable): _____ Have you ever applied for admission to any of the University of Miami graduate programs: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, when: _____	

13. List chronologically all colleges and universities attended, dates of attendance, major subject(s), and degree(s) received or expected. You should immediately request the registrar of each and every institution attended to send official transcripts to the Office of International Admission. No action will be taken on this application until official transcripts of all academic work are received.

	College or University	Location	Month and year of attendance
A.	_____	_____	_____, 19____ to _____, 19____
	Major(s) _____		Degree(s) _____
B.	_____	_____	_____, 19____ to _____, 19____
	Major(s) _____		Degree(s) _____
C.	_____	_____	_____, 19____ to _____, 19____
	Major(s) _____		Degree(s) _____
D.	_____	_____	_____, 19____ to _____, 19____
	Major(s) _____		Degree(s) _____

If more space is needed, use separate sheet.

14. List all courses (titles and credits) in which you are currently enrolled or which you will complete before date of admission:

15. In the space below state your reasons for desiring to enter graduate study or describe your future academic and vocational plans:

16. Indicate your honors, academic and professional awards, fellowships and memberships, and major activities:

17. Name and address of current employer or firm: _____

Title and nature of position: _____

List your previous employment: _____

This form should be used by all applicants to graduate programs who hold (or expect to obtain) temporary (non-immigrant) visas, and by United States citizens and permanent residents who have completed part or all of their college or university education outside of the United States.

I certify that all information provided on this application is complete, factually accurate, and honestly presented. I further understand that my admission and subsequent registration may be canceled if information is found to be false or intentionally omitted. In applying, I agree, if accepted, to familiarize myself with the rules and regulations of the University of Miami and its Graduate School, and to abide by them.

Signature

Date

TO BE COMPLETED BY ALL APPLICANTS FOR THE DOCTORAL DEGREE

- A. State your reading ability in two of the following: French, German, Classical Latin, Russian and Spanish. Indicate any other modern languages which you can read competently

- B. Have you passed a foreign language examination for a graduate degree? No Yes

If yes, which language(s): _____

At which college or university?

For what degree(s)? _____

- C. Indicate original work or investigation which you have done, listing title, date, and place or publication (if applicable), including any books or contributions to periodicals:

TO BE COMPLETED BY APPLICANTS IN THE AREAS INDICATED BELOW**College of Arts and Sciences**

Department of Biology

Indicate which division is best related to your field of interest: Behavioral/Ethology Ecology
 Evolution/Systematics Genetics Neurobiology Tropical Biology

Department of Psychology (Doctoral candidates only)

Indicate which one of the following best describes your field of interest: Adult Clinical Child Clinical
 Applied Developmental Health Clinical Behavioral Neuroscience Behavioral Medicine
 Pediatric Health Clinical

School of Education

Indicate which one of the following concentrations apply: Higher Educational Leadership Teaching & Learning
 Educational Research Counseling Psychology Reading & Learning Disabilities Educational Leadership

Specialist and doctoral candidates must submit on a separate sheet a listing of all teaching positions in reverse chronological order, starting with the applicant's most recent position. List any non-teaching positions that may be pertinent to your application. Please include the name of the school, location, title of position, dates of employment, and reason for leaving.

School of Music

Indicate which area of specialization you are seeking:

Performance: _____ Conducting Composition Theory
 Musicology Music Education

STATEMENT OF FINANCIAL RESPONSIBILITY
(FOR FORM I-20 OR IAP-66)

This statement is not required of United States citizens or permanent residents of the United States. MI other applicants, and their sponsor or family member (if applicable), must answer the questions below.

Include bank verification or an official statement of sponsorship of finances, in English, with this statement. Figures must be stated in U.S. currency.

- 1. Can you pay for your round trip transportation to Miami? Yes No
If no, please explain:

- 2. Amount in U.S. dollars that you will have available for your use each year in the United States. Indicate specific sources of funds, the amount available each year, and when during the academic year these funds will be available.

Person(s) from whom you will obtain funds in your home country:

Person(s) from whom you will obtain funds in the United States:

Total funds available per year: \$ U.S.

- 3. Have you applied, or do you expect to apply, for assistance, fellowships, or loans from any organization, committees, or educational institutions in your home country? Yes No

If yes, please explain:

- 4. If there are persons who will accompany you and be dependent upon you for financial support while you are attending the University, list their names, ages, relationship to you, and your plans for their financial support during the time you are in the United States:

I certify that the statements given by us on this form are complete and accurate.

Signature of Applicant

Signature of Sponsor or Guarantor

Print Name

Print Name

Date

Address

Date

An Equal Opportunity/Affirmative Action University

