

**The University of Memphis  
Department of Biological Sciences  
Graduate Student Application**

*(Mail or fax to the address below)*

Last Name	<input type="text"/>	First Name	<input type="text"/>	MI	<input type="text"/>
Mailing Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Country	<input type="text"/>
				Zip	<input type="text"/>
Email Address	<input type="text"/>		Telephone	<input type="text"/>	

Name and Location of Undergraduate School	<input type="text"/>				
Dates of Attendance	<input type="text"/>	Major	<input type="text"/>	Degree Conferred	<input type="text"/>

Semester Applying For	<input type="text"/>	Application Date	<input type="text"/>		
Degree Program	MS Thesis <input type="checkbox"/>	MS non-Thesis <input type="checkbox"/>	PhD <input type="checkbox"/>		
Applying for a Graduate Assistantship	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	
Area of Interest within Biological Sciences	<input type="text"/>				
Potential Major Professor	<input type="text"/>				

Undergraduate GPA	<input type="text"/>	Graduate GPA	<input type="text"/>		
GRE (Graduate Record Examination)	Verbal <input type="text"/>	Quantitative <input type="text"/>	Date Taken	<input type="text"/>	
TOEFL (Test of English as a Foreign Language) (if applicable)					
Paper <input type="text"/>	iBT <input type="text"/>	Date Taken	<input type="text"/>		

Note: Two letters of recommendation from persons qualified to comment on your qualifications should be sent to:

**The University of Memphis  
Department of Biology  
3700 Walker Avenue  
Ellington Hall Room 203  
Memphis, Tennessee 38152  
Fax: 901-678-0173**

## Statement of Goals

A narrative (maximum of two pages) detailing your reasons for applying to the Department of Biology for graduate work and financial support. Include a description of your professional goals.

