

## **International Student Application for Graduate Studies**

Office of International Admissions University of Houston Houston, Texas 77204-2161 U.S.A.

Note: This is a pressure sensitive form. Please print or type in the space provided. DO NOT WRITE in the shaded areas. Return BOTH copies to the address above.

	SECTION A												
Please indicate the semester you wish to begin studies at UH:													
Fall	Summer Spring												
Enter your social security number below: It will be used as your student identification number and will assist us in our efforts													
	o serve you. If you do not have a social security number, a temporary file number vill be assigned by the Office of Admissions.												
Date of Birth: (Western calendar) This info	•												
MONTH DAY YEAR													
Name (as written on your passport, if you have one):													
LAST (FAMILY)  SUFFIX  FIRST  MIDDLE  Name (if different from above or on any previous academic records):													
LAST (FAMILY)	SUFFIX FIRST MIDDLE												
Permanent Address:													
NUMBER AND STREET (PLEASE INCLUDE ALL APARTM	MENT NUMBERS)												
	STATE ZPOR TELEPHONE												
CITY STATE ZIP OR TELEPHONE POSTAL CODE													
COUNTRY													
Present Address (for correspondence conc	erning this application):												
NUMBER AND STREET													
NUMBER AND STREET													
CITY	STATE ZIP CODE TELEPHONE												
	SECTION B												
COUNTRY	Desired field of study? (See majors, pages 5-6.)												
Demographic Information	MAJOR CONCENTRATION												
Please supply information for statistical purposes only.	DEGREE OBJECTIVE												
Ethnic code (check one):	Will you enroll: Full time or Part time? Will you attend: Day classes or Evening classes?												
	Below is a listing of graduate degree programs. Indicate degree objective by checking one box:												
Citizen of another country	Master's degrees: M.A. M.B.A. M.E.E.												
American mulan/Alaskan Native	☐ M.Arch.       ☐ M.S.A.       ☐ M.S.       ☐ M.S.Phys.Op.         ☐ M.S.E.E.       ☐ M.S.I.E.       ☐ M.S.W.       ☐ M.S.C.E.												
Asian/Pacific Islander	☐ M.S.E.E.       ☐ M.S.I.E.       ☐ M.S.W.       ☐ M.S.C.E.         ☐ M.S.Che.       ☐ M.S.O.E.       ☐ M.C.E.       ☐ M.S.Ch.E.												
African American	M.S.Ch.E. M.F.A. M.S.B.E. M.Ch.E.												
Chicano/Mexican American	M.S.Accy. M.M.E. M.H.M. M.S.M.E.												
Hispanic	M.I.E. M.S.Phar.* M.S.Mat.E. M.S.Env.E.												
	☐ M.M. ☐ M.S.Oper. ☐ M.Ed.												
White Gender:	Doctoral degrees:												
*Indicate area of concentration.													
Female Male Academic level you have achieved:													
	Baccalaureate 3 Master's 4 Doctoral 5 Other 6												

Please check the appropriate box if y	ou would lik	ke inform	ation	on the	follo	wing:		SECTION C						
Center for Students with DisABILITIES Y Veterans' Services Y								SOURCE PC						
Financial Aid 8 On-campus Housing/Graduate Students 9							50	ORCE						
Other (please specify)							GR	E ,	Y/N	V		M	A	
If appropriate to the program to which you are applying, please indicate														
which examinations you have taken or plan to take in the future:  GMAT Y/N V  M											_			
GRE Date	V _		M		A					oxdot				
GMAT Date	V .		M		т		TO	EFL `	Y/N	Т		MAT Y/N	N T	
TOEFL* Date T MAT Date										Т				
*See the international graduate brochure for TOEFL requirements.														
Please list chronologically all schools attended since graduating from high school, including present institution, regardless of length of attendance. Include attendance at any of the University of Houston System campuses.														
COLLEGE OR INSTITUTION		DATES	ATTE			TYPE	_		HOU	_	G	.P.A.	MAJOR	
LOCATION (CITY AND STATE)  COLLEGE/UNIVERSITY	(	FROM (MO./YR.)		TO (MO./YR.)		DEG	REE	KEE EA		ED	J., ., 1.			
Α.								$\perp$			<u> </u>		<u></u>	
CITY/STATE														
COLLEGE/UNIVERSITY		DOC			INS	1		Y/E		START	Ι	E	ND	
B. CITY/STATE			$\perp$		П			$\perp$		П				
COLLEGE/UNIVERSITY		DOC			INS	T		Y/E		START			ND .	
C.														
CITY/STATE										П				
COLLEGE/UNIVERSITY		DOC			INS	Т		Y/E		START	T	E	ND	
D.			$\perp$				_	$\perp$						
		DOC			INS	T		Y/E		START			:ND	
References: Please list the names and addresses of at least three persons, preferably professors or professionals under whom you have studied.														
NAME		ADI	DRES	SS			Ph	HONE	NUM	BER		POS	ITION	
													_	
Please list, on a separate sheet of paper, any professional or academic awards you have received (publications, awards, prizes, scholarships, or fellowships). You may also list any work experience which may be relevant to your chosen field of study.  Residency Information: You are responsible for providing correct information about your visa status and residency.  Failure to answer these questions completely may result in your being classified incorrectly for visa or tuition														
purposes. Additional documentation r	nay be requi	ired as is	deer	med ned	essa	ry by th	e univ	ersity	/.				SECTION D	
Are you a U.S. citizen?  yes														
What is the country of your birth?			1	nat is the	cou	ntry of y	our c	itizen	ship?	·			VISA	
Are you a permanent resident or refugee?											COUNTRY			
Applicants who hold an A, G, or K vis														
Are you claiming Texas as your place									7		no		RES	
If yes, how long have you resided in 7	Texas?	ye	ar(s)	·		month(s	s)							
What county?							_						TUITION	
I certify that the information submitted is complete and accurate. I further understand that providing inaccurate information can be considered sufficient cause for rejecting my application or terminating my enrollment at UH.														
Signature										Date				
	SECTION	N E—DO	NO	T WRI	TE B	ELOW	THI	S LIN	ΙE					
AS LETTER D D M M Y Y	AS LETTER D D M M Y Y Y Y SPECIALIST FB F PH STMT E.EX. FN											STMT E.EX. FN		
NOTES:														