The University of Arizona
DEPARTMENT OF GEOSCIENCES
Graduate Program

PSM APPLICATION CHECKLIST

Application Deadline:  FRIDAY, JANUARY 4, 2013 at 11:59 pm MST.

UA GRADUATE COLLEGE - apply now

___ Complete required on-line application at: http://grad.arizona.edu/prospective-students
___ Contact GRE to have scores sent to U of A; Institution code: 4832 (GRE not required)
___ Contact TOEFL to have scores sent to U of A; Institution code: 4832 (non-English speakers)

UA GEOSCIENCES DEPARTMENT - prepare these materials for submission

___ One official copy of all transcripts and one official copy of all degree/diploma certificates
   (Mailed to Geosciences in sealed envelopes from issuing institutions. Submitted in the original language
   and accompanied by an English translation officially verified by the issuing university.
   See: http://grad.arizona.edu/admissions/admissions-requirements/all-degree/transcript-requirements)
___ Scans of unofficial transcripts, diplomas and translations, saved as PDF files
___ TOEFL scores (you can enter score in our on-line application) (waived with degree from English-speaking university)
___ Three faculty prepared to write letters of recommendation
   (recommenders can submit letters on-line or by mail. For mailed letters, use the attached cover sheet.)
___ Statement of Purpose (1-2 pages), saved as PDF
___ Resume/CV and abstracts of any research publications, saved as PDFs

Geosciences on-line application:
https://www.geo.arizona.edu/admissions/
Opens on or before November 1, 2012

Financial Support
All applicants are considered for financial support.

Graduate Program
Department of Geosciences, GLD-S 210
P. O. Box 210077
The University of Arizona
Tucson, AZ 85721-0077

Phone: (520) 621 - 6004
FAX: (520) 621 - 2672
gradapps@geo.arizona.edu
http://www.geo.arizona.edu/
**RECOMMENDATION FOR GRADUATE STUDIES**

**TO THE APPLICANT**
Complete this section. Give this form to a person who can evaluate your potential for success in a graduate program and return their completed recommendation (in sealed envelope, signed on flap) with the departmental application, or have them send the recommendation directly to the Department.

Name of applicant: ___________________________________________________________

APPLICANT’S WAIVER OF RIGHT OF ACCESS TO CONFIDENTIAL RECOMMENDATION:
I hereby waive my right of access to any information contained in this recommendation (not valid unless signed).

Signature of applicant: ___________________________________ Date: ________________

Application for: ☐ MS ☐ PHD

**TO THE PERSON MAKING THE RECOMMENDATION**
We wish to determine both the applicant’s aptitude for graduate study and probability of success in a graduate program. Your comments will be carefully considered by the Admissions Committee. **Please include your letter of recommendation with this form.**

How long have you known the applicant? _______________________________________

In what capacity? _____________________________________________________________

How would you predict the applicant’s success for: MS ___ definitely PHD ___ definitely
___ probably ___ probably
___ unlikely ___ unlikely

Would you accept the applicant into your own graduate program? ☐ Yes ☐ No

If not, please comment: _______________________________________________________

Rate the applicant in the areas listed below:

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<th>Exceptional</th>
<th>Superior</th>
<th>Average</th>
<th>Below Average</th>
<th>Not Observed</th>
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<td>General Academic Ability</td>
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<td>Motivation for Graduate Study</td>
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<td>Work Habits</td>
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<td>Creativity and Ingenuity</td>
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<td>Initiative</td>
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<td>Ability to Communicate</td>
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<td>Maturity</td>
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<td>Potential as Research Assistant</td>
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Please use **the reverse side of this form or attach a separate letter** to provide a written evaluation of the applicant.

Print Name: ___________________________ Signature: __________________________ Date: _______

Title: ___________________________ Institution: ___________________________