## UNIVERSITY OF MAINE

## APPLICATION FOR ADMISSION TO THE GRADUATE SCHOOL

Return the original application to the Graduate School, 42 Stodder Hall, University of Maine, Orono, ME 04469-5755, with \$65.00 non-refundable application fee.

Application fee increases by \$10 for each program applied for beyond the first

## PLEASE TYPE OR PRINT CLEARLY

Name		bak	ker		Tim			baker			
		(Family Name)			(First)			(Middle)			
Maiden name or	other names	s unc	der which records	may be f	filed						
Mailing Address	qd			%							
	(Street)		(Additional)	(City)		(State or Province)	(Zip Code)		(Country)		
Permanent Address	13		%	Bowdoin		HI	042	87	BWA		
	(Street)		(Additional)	(City)		(State or Province)	(Zip	Code)	(Country)		
Phone Number					Work P	'hone					
Email Address		tim	timothy.d.baker@umit.maine.edu								
Place of Birth											
					(City, State, Country, if not USA)						
Date of Birth		09/20/1988		Gender							
Citizen of S		SYI	R		If U.S. Citizen, legal resident of						
	(Cc		untry)		(State)						
If you are a resid	dent alien, pl	ease	enclose a copy of	your gree	en card v	vith your applicat	tion				
Residency Status				resident							
U.S. Social Security No. (if applicable)				?							
	ersity communitie	es, to	are asked by many, inc describe the racial/ethni								
Do you consider yourself to be Hispanic/Latino? (see application instructions regarding ethnicity explanation)				No							
In addition, select one or more of the following racial categories to describe yourself:				unspecified							
Present Occupat	tion										

Programs Applied	For:								
Program 1									
Degree you are seeking:			0 - AECGS	0 - AECGS					
Proposed departme	ent of study		AEW						
Major area of inter	est \$dsf		Minor area of inte	Minor area of interest					
Do you expect to study full or part time?			FULL-TIME						
Semester you plan t	to begin your gradua	ate program	SPRING 2010						
entering and leaving these institutions to	ng degrees received of the Graduate Scho	or for which you are	a candidate. Officia hool will order UM	that you have attende al transcripts must be (ORONO) transcript	sent directly from				
Name of Institution	Location	Dates Attended	Major	Name of Degree or Diploma	Date Received or Expected				
	,	-							
If possible, please i average on a 4.0 sc	-	ative undergraduate	0.00						
	ndicate your cumula average on a 4.0 sca		0.00						
		r courses you expect raduate School whe		lling at UM. Please ha	nve a				
	rizes or scholarships ou have been elected	•	to you on the basis	of academic achieven	nent, or any honor				
		s related to your pro		tudy. If you have taug er creative work.	tht, name subjects.				
institution you have	e attended (or the in avioral misconduct,	for a disciplinary vio ternational equivale that resulted in you	ent) whether related	to academic	No				
Date					, 1				
Explanation									

Have you ever b a juvenile crime		d of a	a misdemeanor, fo	elony or	other cri	me, or adjudica	ted of	committing	No	
Date										
Explanation										
Have you taken	or intend to	take	the:							
Graduate Recor	d Examinati	on:			No					
GRE scores:	Verbal		0	Quanti	tative	0	An	alytical	0.0	
Subject						Date				
Graduate Management Admission Test:					Test Date:					
GMAT Score:					0					
Miller Analogies	s Test:	No			Test Da	ate:				
MAT Score:					0					
For GMAT, Grace For MAT, Harco	luate Manage urt Assessmer	ment nt, <u>w</u>	Testing Service, wat Admissions County Www.harcourtassess and proficiency in e	ment.con	.mba.cor	n, institution cod	le for U	JM (ORONO)	): 1ZF-RM-18	}
Language		Wı	riting		Readin	g		Speaking		
df										
dfdf										
If English is not	your primar	y lar	nguage, please ind	licate the	number	of years you ha	ve stu	died English	(give dates):	
In secondary or	middle schoo	ol:								
In university:										
Under private a	uspices:									
Have you applie admission to Gr			nis institution for		No					
a. When:					b. To w	hat departmen	t?			
c. Degree award	ed and date:									
d. Did you witho	draw?	No			When?					

Do you wish to apply for an a	ssistantship?			No		
You must contact the Departs to be nominated for a Univers		•		stantsl	nip or if you v	wish
Contact Student Financial Ai	d, Wingate Hall, 207-581-132	4, for information on colle	ege work-stu	ıdy or	student loan	s.
Do you intend to apply for cer Program? (see www.nebhe.or		the New England Regiona	al Student		No	
If you have spoken or corresp please give a name or names.	oonded with any member of t	he University of Maine fac	culty regard	ing yo	ur applicatio	n,
List the names and addresses recommendation must be wri your capacity for advanced st	tten by people qualified, thro	ough personal experience v	with your ac	ademi	c work, to ju	_
Tafsg Bsdf	ti ba	tim	bak			
,	,	,				
Email: Phone: 2078375482	Email: Phone: 207837548	v.d.baker@umit.maine.edu 75482				
Email: Phone:						
The following questions shoul	ld be completed ONLY by ap	plicants who are not citize	ens of the Ur	nited S	tates.	_
Have you taken or plan to tak	xe the TOEFL examination?				No	
Date of exam:		TOEFL score:	0			
Remember: Foreign students	must submit TOEFL scores	as part of their application	n packages.			
Indicate below the career you teaching, government, busine		remain in the United Stat	tes after con	npletio	on of studies (	(e.g.,
If you plan to continue studies approximate duration.	s for another degree, describe	e briefly the subject, locati	ion, estimate	ed beg	inning date, a	and
If you plan to return to your of employer, location, type of wo	· ·			the de	etails (e.g.,	

How do you expect to the form is available of		•	_		tatement form upon admission.
List the names and add	dresses of any clo	ose relatives or fri	ends in the Uni	ited States (indic	cate relationship):
List persons to be noti	fied in case of an	emergency:			
(a) In United States		,			
	(Name)	(Address)		(Phone)	(Relationship)
(b) In home country		,			
	(Name)	(Address)		(Phone)	(Relationship)
documents will be deni authorities of this action Compose a brief essay personal intentions and	ied admission an on and information on a separate pa d objectives. Idei	d will receive no r on will be shared v ge (300-500 words ntify any special in	efund of any fowith governments), to be read butterest you wou	ees paid. The Unent agencies.  y professors in yuld like to pursu	yone submitting falsified niversity will notify appropriate your field on your academic and e now or in the future. If you
have previously attend page, or email attachm		, ·	in why you wis	h to transfer to l	Maine. Attach essay on separat
Signature			Date		