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		Be	langer		Josh					
		(Family Name)			(First)			(Middle)		
Maiden name or other names under which records may be				e filed						
Mailing Address	_			Bangor		ME	044	01	VCT	
	(Street)		(Additional)	(City)		(State or Province)	(Zip	Code)	(Country)	
Permanent Address	123 test street			Bangor		ME	044	01	VCT	
	(Street)		(Additional)	(City)		(State or Province)	(Zip	Code)	(Country)	
Phone Number		1-2	07-942-7599		Work Phone			1-207-882-5	5295	
Email Address		jos	hua.calvin.belang	er@gmai	l.com					
Place of Birth					Bangor					
					(City, Sta	te, Country, if not USA	A)			
Date of Birth					Gender			M		
Citizen of		US	A		If U.S. Citizen, legal resident of			ME		
		(Co	untry)		(State)					
If you are a resi	dent alien, p	leas	e enclose a copy o	of your g	reen card with your application					
Residency Status				residen	t					
U.S. Social Security No. (if applicable)					6•?Z					
Note on Ethnicity: Colleges and universities are asked by many, including the fand our own college/university communities, to describe the racial/ethnic backgrequests, we ask you to answer the following two questions:										
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:				Asian, Black,						
Present Occupation										
Programs Applied For:										
Program 1										

Degree you are see	king:		Food Sci & Human Nutr-MS - FSNS						
Proposed departm	ent of study		FSN						
Major area of inte	rest		Minor area of interest						
Do you expect to st	tudy full or part tim	ne?	FULL-TIME						
Semester you plan	to begin your gradı	uate program	FALL 2010						
of entering and lea from these institut	cal order all institut aving degrees receiv tions to the Graduat e made until all you	ved or for which you te School. The Grad	are a candidate. O luate School will ord	fficial transcripts m					
Name of Location Dates Attended Institution		Major	Date Received or Expected						
	,	-							
	If possible, please indicate your cumulative undergraduate average on a 4.0 scale (A=4):			0.00					
	indicate your cumu e average on a 4.0 se		0.00						
	ourses in programs on anscript sent to the G	-		_	se have a				
- · -	rizes or scholarship which you have bee	-	ed to you on the bas	is of academic achie	evement, or any				
	ent or other activition								
institution you hav	en found responsible we attended (or the i navioral misconduct e institution?	international equiva	lent) whether relate	ed to academic	al No				
Date									
Explanation									
Have you ever bee a juvenile crime?	en convicted of a mis	sdemeanor, felony o	or other crime, or ac	ljudicated of comm	itting No				
Date									
Explanation									
Have you taken or	intend to take the:								

Graduate Record Examination:				No								
GRE scores:	Verbal		0	Quanti	tative	0		Analytica		0.0)	
Subject			•			D	Pate					
Graduate Management Admission Test:		No			Test Date:							
GMAT Score:			0									
Miller Analogies Test:					Test Date:							
MAT Score:				0								
For GRE and TO For GMAT, Gra For MAT, Harco	DEFL, Educateduate Managourt Assessme	tiona emer ent, <u>y</u>	lirectly to the Gra Il Testing Service, nt Admissions Con www.harcourtasse nd proficiency in	www.ets uncil, ww ssment.c	s.org, ins ww.mba.c	titu com	tion code for U on, institution code	M (O	ORONO): 39 r UM (ORO	NO)	: 1ZF-RM-18	
Language		- 	riting		Readin	<u> </u>			Speaking	Sneaking		
					Keauing							
If English is no	t your prima	ry la	anguage, please in	ndicate t	l he numb	oer	of years you h	ave s	studied Engl	ish	(give dates):	
In secondary or	middle scho	ool:										
In university:												
Under private a	nuspices:											
Have you applied admission to G			this institution fo	r	No							
a. When:					b. To what department?							
c. Degree award	ded and											
d. Did you with	draw?	No			When?	?						
Do you wish to	apply for an	assi	stantship?		•				No			
	_		nt Chairperson dersity fellowship	-	-		_			ntsh	ip or if you	
Contact Studen loans.	t Financial A	Aid,	Wingate Hall, 20	7-581-13	24, for i	nfo	rmation on col	llege	work-study	or	student	
Do you intend to apply for certification of eligibility under the New England Regional Student Program? (see www.nebhe.org)							No					
If you have spo application, ple		_	ded with any me or names.	mber of	the Univ	ver	sity of Maine f	acult	ty regarding	you	ır	

List the names and ad recommendation mus judge your capacity fo School.	t be written by j	people q	ualified, thr	ough perso	nal expe	rience wit	th your a	academio	c work, to		
A A	B B				CC						
,			,				,				
Email: joshua.calvin.belanger Phone: 207-323-4567	Email: Phone: 2071234567				Email: Phone: 2071234567						
The following question	ns should be co	npleted	ONLY by a	pplicants w	ho are n	ot citizens	s of the U	United S	tates.		
Have you taken or pla	n to take the T	OEFL ex	xamination?						Yes		
Date of exam:			TOEFL score:				0				
Remember: Foreign s	tudents must su	bmit T(DEFL scores	as part of t	their app	plication p	oackages	S.			
1	Indicate below the career you plan to pursue if you plan to remain in the United States after completion of studies (e.g., teaching, government, business, industry).										
	- -										
If you plan to continue studies for another degree, describe briefly the subject, location, estimated beginning date, and approximate duration.											
	If you plan to return to your own country immediately after completing study or research, state the details (e.g., employer, location, type of work, estimated beginning date) that may be known to you.										
How do you expect to admission. The form i			-	_					upon		
List the names and ad	List the names and addresses of any close relatives or friends in the United States (indicate relationship):										
List persons to be not	ified in case of a	n emerg	gency:								
(a) In United States			,								
	(Name)		(Address)		(Phone)		((Relationshi	ip)		
(b) In home country			,								
	(Name)		(Address)		(Phone)		((Relationshi	ip)		

documents will be denied ad	r federal law to enroll non-immigrant alien students. ssion and will receive no refund of any fees paid. The action and information will be shared with governm	University will notify
and personal intentions and If you have previously attend	arate page (300-500 words), to be read by professors jectives. Identify any special interest you would like I another graduate school, explain why you wish to tchment to graduate@maine.edu	o pursue now or in the future.
Signature	Date	