

Supplementary Application for Graduate Degrees in Environmental Health Science

Name: (First and Last)			Degree:	MS	PhD
Application for: (Select term and enter year)	FALL	SPRING	SUMMER	Year:	

Primary area(s) of research interest:

Name(s) of EHS facul	ty member(s) that	you are interested in	working with:
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Have you already been in contact with the faculty member(s) listed?	Yes	No
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If yes, please indicate how and when (*date*) contact was made: (By phone, email, etc.) *It is highly recommended that you identify a faculty advisor before applying.*

Please combine this form with the following:

1. CV or resume

2. One page statement of background and interests in Environmental Health

3. (*Optional*) One additional item that illustrates or highlights exemplary work, preparation, etc. (e.g., reprint of a publication on which you are an author/co-author, details of a significant award, etc.)

Send all items either:
A) As one PDF file (*preferred*) to the EHS Graduate Coordinator at <u>ehsgrad@uga.edu</u>
B) Send hard copy via Mail:

Attn: Graduate Coordinator
Environmental Health Science Dept.
206 Environmental Health Science Bldg.

150 E Green St

Athens, GA 30602

206 Environmental Health Science Building Athens, Georgia 30602-2102 Telephone 706-542-2454 | Fax 706-542-7472 An Equal Opportunity / Affirmative Action Institution