

Application for Graduate Admission to the Department of Entomology
College of Agriculture and Life Sciences
University of Arizona

Last Name _____ First Name _____

Middle Name _____ Date of Birth _____

Email Address _____

Degree Desired:

- MS PhD (already have MS) PhD (do not have MS)

Rate your top three Entomology research interests as 1, 2, and 3:

- | | | |
|-------------------------------------------|------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Aquatic | <input type="checkbox"/> Behavior | <input type="checkbox"/> Biological Control |
| <input type="checkbox"/> Chemical Ecology | <input type="checkbox"/> Ecology | <input type="checkbox"/> Evolution |
| <input type="checkbox"/> Genetics | <input type="checkbox"/> Genomics | <input type="checkbox"/> Integrated Pest Mgmt. |
| <input type="checkbox"/> Medical Ento. | <input type="checkbox"/> Physiology | <input type="checkbox"/> Plant-Insect Interactions |
| <input type="checkbox"/> Resistance Mgmt. | <input type="checkbox"/> Social Insect Biology | <input type="checkbox"/> Systematics |
| <input type="checkbox"/> Toxicology | <input type="checkbox"/> Urban Entomology | <input type="checkbox"/> Other (list) |

Expected source of financial support:

- Personal funds
 Research or teaching assistantship
 Fellowship
 Other

Signature

Date

QUESTIONS? Contact Patricia Baldewicz, Graduate Coordinator, at
pbaldewi@ag.arizona.edu (preferred), or phone 520 621-1152, fax 520 621-1150