



FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY
SCHOOL OF GRADUATE STUDIES AND RESEARCH
GRADUATE FEEDER SCHOLARS PROGRAM – Linda G. Knight, Director

PARTICIPATION FORM

PARTICIPANT INFORMATION:

NAME: _____
Last First Middle/Maiden

FAMU STUDENT ID #: _____

MAILING ADDRESS: _____

TELEPHONE: () _____

GENDER: MALE _____ FEMALE _____ EMAIL ADDRESS: _____

RACE: WHITE ___ BLACK ___ HISPANIC ___ AMER. INDIAN ___ ASIAN ___ PCF. ISL _____

OTHER (SPECIFY): _____

U.S. CITIZEN?: YES ___ NO ___ IF NO, WHAT TYPE OF VISA DO YOU CURRENTLY HOLD? _____

UNDERGRADUATE MAJOR: _____

UNDERGRADUATE MINOR: _____

CLASSIFICATION: SOPHOMORE ___ JUNIOR ___ SENIOR ___ GRADUATE ___ OTHER _____

SEMESTER HOURS COMPLETED: _____ CUMULATIVE GPA: _____

EXPECTED GRADUATION DATE: _____ DATE GRADUATED FROM FAMU: _____

DEGREE EXPECTED: BA ___ BS ___ MA ___ MASS ___ OTHER (SPECIFY) _____

ENTRANCE EXAM SCORES: GRE _____ GMAT _____ LSAT _____ MCAT _____ DAT _____

OTHER EXAM (SPECIFY): _____ OTHER EXAM (SCORE): _____

IF NOT TAKEN, WHEN DO YOU PLAN TO TAKE: NAME OF EXAM: _____ DATE: _____

PREFERRED GRADUATE STUDY DISCIPLINE(S): _____

PREFERRED GRADUATE DEGREE: MASTERS ___ PROFESSIONAL ___ DOCTOR OF PHILOSOPHY _____

Statement of Acknowledgment

I understand participation within the Graduate Feeder Program does not guarantee acceptance or funding from any Feeder institutions. Possible acceptance into any graduate program is based on the Feeder Institution's admissions standards. Funding is also granted at the discretion of the Feeder Institutions. FAMU has no authority over fund disbursements at other institutions. By signing this application, the aforementioned policy is acknowledged.

Applicant's Signature: _____ Date: _____

PLEASE RETURN **TYPED** FORM AND **UNOFFICIAL TRANSCRIPT(S)** TO: FLORIDA A&M UNIVERSITY,
GRADUATE FEEDER PROGRAM, **ATTN: LINDA KNIGHT**, 400 TUCKER HALL, TALLAHASSEE, FL 32307