



Master of Science – Atmospheric Science

Family Name	First Name	Middle Name, if any

Date of Birth (mm/dd/yyyy)	ApplyTexas ID Number

Do you intend to enroll full-time or part-time?

Full-time

Part-time

Please list your research interests:

Which faculty member do you want to work under? _____

What are your future career goals?

Do you wish to seek a graduate stipend?

Yes

No

If yes, please rank your preference of what type of assistance:

Teaching Assistantship

Research Assistantship