## **UGA Coastal Summer Semester Application**

SUMMER SHORT SESSION ONE - June 8 - July 6, 2016

Deadline for full consideration: January  ${\bf 1}$  ,  ${\bf 201}$ 

Program Co-Directors: Drs. M. A. Moran, J. Nelson, D. Savidge

Full and Legal Name:			
	Last	First	Middle
Local Address			
Street:			
City:	State	e: Z	Zip:
Phone:	E-mail:		
Permanent Address			
Street:			
City:	State	e: Z	Zip:
Phone:	E-mail:		
Parent(s)/Guardian(s)Nam	ne(s):		
Person to contact in case	of emergency:		
Name:	Rela	Relationship	
Street:			
City:	State:	Zi	p:
Home Phone:	Work Phone:		
E-mail:		Cell Phone:	
Personal Information:			
Male _ Female _ Date of	Birth:/	_ Marital Status: S	ingle Married _
UGA ID#			

Academic Information:	
School you currently attend:	
Major: M	inor, if applicable:
Current Cumulative GPA:	
Class Standing (during summer 201): Fi	reshman Sophomore Junior Senior
	a \$200 down payment, which will be applied toward the total will be refunded if your application is not accepted.
Franscript: nclude a current transcript with your app cranscript is sufficient.	lication. For UGA students, a copy of your DegreeWorks
University of Georgia to complete and sign	e in the Coastal Summer Semester are required by The n a student agreement and waiver which stipulates the terms and a waiver of liability.
Application Signature:	
Signature	Date:

## STUDENTS ARE REQUIRED TO ENROLL IN TWO COURSES: MARS4500 and EITHER BIOL4960 OR MARS4510

Please include a check for \$200 made out to the Department of Marine Sciences

Coastal Summer Semester, c/o Dr. Mary Ann Moran, Department of Marine Sciences, University of Georgia, Athens, Georgia 30602-3636; mmoran@uga.edu

If hand-delivering this application, please give to Cat Mills, 220 Marine Sciences Building.

## For further information contact:

Dr. Mary Ann Moran, 285A Marine Sciences Building, mmoran@uga.edu

For Office Use Only:		
Student Name:	Date application received:	
Application fee received:	Check number:	
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