## University of Pittsburgh School of Dental Medicine Application for Admission to the Graduate Program in Oral Biology Degree Sought: ☐ Ph.D. ☐ M.S. Specific Track: **PERSONAL DATA** Applicant's Name (last, first, MI): Home/Work Telephone: E-mail address: Present Mailing Address: Permanent Mailing Address: **EDUCATION** List all academic work beyond high school, including current programs. FROM: UNTIL: DEGREE GPA or INSTITUTION **LOCATION** Percentile **TOEFL or IELTS SCORES** Listening Speaking Writing Reading **Total Score Date of Test** TOEFL (CB) TOEFL (IB) TOEFL (PB **IELTS REFERENCES** (only online references accepted) NAME: ADDRESS: **BUSINESS EMAIL: RELATIONSHIP:**

Please provide answers to the following question(s):
Are you a resident of Pennsylvania?  Yes (more than one year)  Yes (less than one year)  No
DEMOGRAPHIC INFORMATION
The demographic information collected below is designed to provide the institution with ethnic, sex, disability and citizenship data on all applicants. The data are used by the University to respond to requests from U.S. government agencies for aggregated summary information that must be provided by law. This information will not be used by the University in making admission decisions nor will the information on individual students be released outside the University without the written permission of the student.
1. DATE OF BIRTH: 2. SEX:  Female  Male
3. ETHNIC STATUS: ☐ White ☐ Black/African American ☐ Hispanic/Latino ☐ American Indian/Alaskan Native ☐ Asian ☐ Native Hawaiian/Other Pacific Islander ☐ Other ☐ Not Specified
4. DISABILITY: ☐ Auditory[A] ☐ Visual [V] ☐ Motor/Physical [M] ☐ Other [O] ☐ None [N]
5. CITIZENSHIP: U.S. Citizen [US] U.S. Immigrant Permanent Resident [FP] Refugee in U.S. [RF] Non-Immigrant Student Visitor [FS]
<u>U.S. Citizen</u> - A person owing allegiance to the United States of America <u>U.S. Immigrant Permanent Resident</u> - One who intends to make the U.S. his or her permanent residence and who is in possession of a permanent immigration visa by the Department of Justice. <u>Refugee in the U.S.</u> - All aliens who have fled or been rejected from their country of nationality for reasons of race, religion, political opinion or war. <u>Non-Immigrant (Student, Visitor)</u> - All aliens who have residence in a foreign country which they have no intention of abandoning and whose stay in the United States is limited to a defined period of time and a definite purpose that, by nature, may be promptly accomplished.
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Are you currently serving or have you ever served in the U.S. armed services? Yes No
Do you plan to use your own, parent's or spouse's military or verteran education benefits to pay for your education at the University? Yes No
Any material misstatement on this application or its accompanying documents or any forms of dishonesty, including fraudulent practices relating to entrance examinations, will result in disqualification for admission, and if discovered after admission will result in immediate dismissal from the Graduate Program in Oral Biology. It is a condition of admission that entering students agree to support the University's Academic Integrity and Student Code of Conduct, and by signing this application, you so agree.  I certify that the information supplied by me on this application is true and correct to the best of my knowledge.
Signature of Applicant Date

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