



Graduate School

APPLICATION FORMS

Instructions for completing the application package

Please submit the application forms and all application documents (except GRE, GMAT, MAT, and TOEFL scores) to your department. Your complete application package must include the following:

- **two** completed and signed copies of the application form with a copy of the Personal Statement attached to each
- check or money order payable to the University of Rhode Island for the nonrefundable application fee of **\$50** for both in-state and out-of-state applicants. Without this fee your application cannot be processed.
- **two** complete **official** transcripts of all work (undergraduate and graduate) in envelopes that are sealed and signed across the flap
- two letters of recommendation in envelopes that are sealed and signed across the flap
- the completed notification sheet with a self-addressed and stamped envelope (for departmental use)
- the completed Certificate of Residence if you think you qualify for in-state or regional tuition and fees

Place all of the above in one large envelope and address the envelope to the department or program to which you are applying.

THE COMPLETE APPLICATION PACKAGE MUST BE RETURNED DIRECTLY TO THE DEPARTMENT OR PROGRAM TO WHICH YOU ARE APPLYING. PLEASE BE SURE THAT THE DEPARTMENT OR PROGRAM IS IDENTIFIED ON THE LARGE ENVELOPE IN WHICH YOU MAIL YOUR APPLICATION AND SUPPORTING DOCUMENTS.

Please mail your completed application package to:

Department of _____
University of Rhode Island
Kingston, RI 02881

TEST SCORES, IF REQUIRED, SHOULD BE SENT DIRECTLY FROM THE TESTING AGENCY TO THE DEPARTMENT OR PROGRAM TO WHICH YOU ARE APPLYING.

NOTE: Faxed copies of applications or supporting documents will not be accepted. Applications and supporting documents cannot be returned or transferred, nor can copies of documents be supplied or transferred.

You are responsible for submitting this completed package and, if necessary, for having relevant test scores arrive by the stated deadline for the program to which you are applying. Completed applications must be received by **April 15** for summer admission, **July 15** for fall admission, and **November 15** for spring admission. Some programs have earlier deadlines, or they admit new students in the fall term only; please check the details of the program to which you are applying. Information on all graduate degrees awarded at the University can be found in the current *University of Rhode Island Catalog* which can be viewed online at uri.edu/catalog.

For those who wish to be considered for any type of departmental financial award or assistance, including assistantships, note that this package (and all relevant and necessary test scores) must be received in the department to which you are applying by **February 1**.

Affirmative Action: The University of Rhode Island is committed to the principles of affirmative action and the attainment of equal employment and equal educational opportunities for all qualified individuals. For further information, please contact the Affirmative Action Office at 401-874-2442.



UNIVERSITY OF
Rhode Island

Application for Graduate Admission (continued)

Desired Date of Enrollment:

For enrollment in: Fall _____ Spring _____ Summer _____ (Check semester and add year.)
Year Year Year

Full-time (9–15 credits) Part-time

Are you enrolled in or applying to a second graduate degree program at URI? Yes (If yes, please specify.) No

Educational Plans:

Degree: M.A. M.S. Ph.D. M.B.A. M.E.S.M. M.L.I.S. M.M.A. M.M.A./J.D.
 M.M. M.O. M.P.A. D.P.T.

Graduate Program (Plan):

Concentration (Sub-Plan):

(Plans and Sub-Plans are listed on the last page of the application.)

Application Fee Paid:

\$50 Check # _____ Date _____

Academic Background:

List all colleges and universities you have attended (most recent first).

Institution Name	Major	Degree Level	Month/Year	Month/Year	Year of Degree	G.P.A.
_____	_____	_____	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	To <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____
_____	_____	_____	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	To <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____
_____	_____	_____	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	To <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____
_____	_____	_____	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	To <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	_____

Test Information:

Test Dates (Please complete as applicable.)

I took or I will take the Graduate Record Examination (GRE) on

I took or I will take the Graduate Management Admissions Test (GMAT) on

I took or I will take the Miller Analogies Test (MAT) on

I took or I will take the TOEFL* on

I took or I will take the Praxis exams on

*Required for all international students unless a U.S. degree has already been earned.

I have read and understand the admission policies of the Graduate School as printed herein and in the *University of Rhode Island Catalog*.

Signature: _____ **Date:** _____



UNIVERSITY OF
Rhode Island

Graduate School Personal Statement

PLEASE TYPE

Complete and send two copies of this form, attached to the application forms.

Name _____

Department or program to which you are applying _____

Please state your reasons for pursuing a graduate degree in the field you have chosen. Include references to your past study and research in your chosen field, your plans for study at the University of Rhode Island, including problems and issues you want to address, and your personal goals.



**Graduate School Certificate of Residence
for Rhode Island Residents, New England
Applicants Under the Regional Student
Program, and Applicants in the Military**

FOR URI USE ONLY

I _____
O _____
R _____

Failure to return this form (including the certificate of residence properly certified) prior to matriculation will result in your classification as an out-of-state student. Military students must complete this form and provide a copy of their military orders stationing them in Rhode Island. A military spouse must also provide a copy of a marriage license.

Please read the regulations on the next page defining resident and nonresident students for tuition purposes at the University of Rhode Island. For an applicant to be considered a Rhode Island resident for tuition purposes, he or she must have established a bona fide residence in the state for one full year prior to the first class day of the first term of his or her registration. If you are a New England resident, and the plan for which you are applying appears to satisfy the conditions specified in the *University of Rhode Island Catalog*, you should submit this form to request consideration for regional status. Please note that only selected plans are available under this reciprocal program. Determination of regional status is made by the Graduate School, which will notify the applicant of the final decision.

Concealment of facts or untruthful statements may cause you to be subject to denial of admission and/or dismissal from the institution. In addition, Chapter 43, Volume 1, Section 11-18-1 of the General Laws of the State of Rhode Island provides severe penalties for giving a false document to a public official.

It is incumbent upon any student whose status changes from Rhode Island resident to nonresident or from regional status to nonresident status to inform the Graduate School and the Office of Enrollment Services promptly of the facts relating to his or her residence.

Applicant's Name (as it appears on admission application) _____

Social Security # _____ - _____ - _____ Academic Plan _____

Applicant's Permanent Address _____

_____ Since (month/day/year): ____ / ____ / ____

Are you a U.S. citizen? Yes No If not, Alien Registration Number _____

Your visa is: Temporary Permanent

Are you applying under the New England Regional Student Program? Yes No

Certificate of Residence

(Prior to matriculation, Rhode Island residents and applicants for the New England Regional Student Program must submit this form, properly completed, to claim exemption from out-of-state tuition charges.) To be valid, applicant must show residency for a minimum of one year.

Certification of Town or City Clerk (if a registered voter)*

This is to certify that _____ is listed on the records of this office as a legal resident of the town/city of _____ since (month/day/year) _____.

* If not a registered voter, please complete the top portion of the form and provide a copy of each of the following items: long term lease or leases to prove residency for a minimum of one year or a deed if you own residential property in R.I.; a R.I. driver's license; and a R.I. state income tax return (if available).

Signed _____

TITLE _____

Date _____

SEAL:



Regulations Defining Resident and Nonresident Students at the University of Rhode Island

(Adopted by the Board of Governors for Higher Education in 1993.)

A. CHARGES FOR TUITION AND FEES

1. A student who is a resident of the State of Rhode Island shall be classified as a "resident student" and shall pay all tuition and fees prescribed by the Board of Governors for **in-state** students in public higher education.

A student who is not a resident of the State of Rhode Island shall be classified as a "nonresident student" and shall pay tuition and fees prescribed by the Board of Governors for **out-of-state** students in public higher education.

2. Nothing in these regulations shall be construed to revoke, amend, or otherwise affect any agreement relating to student tuition and fees now in effect or entered into in the future pursuant to the provision of the New England Board of Higher Education Compact.

B. DEFINITIONS

1. For the purposes of determining a student's classification, the word *residence* shall mean a student's domicile: the student's true, fixed, and permanent home and place of habitation.

A nonresident student who reaches 18 years of age while a student does not by virtue of that fact alone become a resident student.

The ownership of real or personal property in the state and/or the payment of municipal and/or state taxes in Rhode Island **and/or marriage to a Rhode Island resident** shall be evidence of, but shall not alone establish, residence.

2. The term *emancipated student* shall mean a student who has attained the age of 18 years and whose parents and/or guardians:

(a) have entirely surrendered the right to the care, custody, and earnings of such student; and

(b) have not claimed the student as a dependent for tax purposes for two years; and

(c) whose income was not taken into account by any private or governmental agency furnishing financial education assistance to the student, including scholarships, loans, or otherwise.

If any of the aforesaid tests are not met, the student shall be presumed to be unemancipated.

C. CRITERIA

1. Unemancipated Students

(a) Any unemancipated student whose parents or guardians have been residents of the state for one year immediately preceding the first class day of the first semester of the student's registration in a public college or university shall be classified as a resident student as long as the parents or guardians continue to be residents of the state.

(b) Any unemancipated student who initially was classified as a nonresident student may thereafter obtain reclassification only if the student's parents or guardians establish and maintain residence in Rhode Island for a period of at least one year prior to the first class day of the semester for which the student seeks to be reclassified as a resident student.

(c) The residence of an unemancipated student, including those whose parents are divorced or legally separated, shall follow that of the parent who has legal custody and/or the parent who is responsible for the financial support of the student, whichever favors the student's request for resident student status.

An unemancipated student under guardianship shall be required to present satisfactory documentary evidence of the appointment of the guardian in addition to a certification of the residence of the guardian, which shall be considered the residence of the student unless there are circumstances indicating that such guardianship was created primarily for the purpose of conferring the status of resident student status on the student.

(d) An unemancipated student whose parent is a member of the Armed Forces and stationed in the state pursuant to military orders shall be entitled to the classification as a resident student during any semester the first class day of which is encompassed by the orders. A member of the Armed Forces or his or her spouse stationed in the state on military orders shall be entitled to classification as a resident student.

2. Emancipated Students

(a) Any emancipated student may be classified as a resident student if he or she meets the following tests:

1) At the time of emancipation, the student's parents or guardians were residents of Rhode Island for one year immediately preceding the first class day of the first semester of the student's registration at a public college or university. **OR**

Having become emancipated, the student establishes and maintains residence in Rhode Island for one year immediately preceding the first day of the first semester of his or her registration at a public college or university; and

2) The student does not hold residence in another state or foreign country; and

3) The student is and continues to be a resident of Rhode Island.

(b) Any emancipated student who initially was classified as a nonresident student may thereafter obtain reclassification as a resident student only if the student establishes and maintains residence in Rhode Island for a period of at least one year prior to the first class day of the semester for which he or she seeks to be reclassified as a resident student.

A student from another state or foreign country who is enrolled at a public college or university for more than six credits per semester shall be presumed to be in Rhode Island primarily for educational purposes and will be presumed to have not been a resident of the state during the time so enrolled. Continued presence in Rhode Island during vacation periods or occasional interruptions in the course of study will not, of itself, overcome these presumptions.

D. PROCEDURES FOR INSTITUTIONS

1. The Residency Officer shall classify each person accepted by a public college or university as a resident or nonresident student. Said classification shall be based upon all relevant information made available to the Residency Officer, including, but not limited to, information submitted by or on behalf of the student. The Residency Officer may, as a condition of registration, require such written documents and other relevant evidence as is deemed necessary or helpful to determine the residence of the applicant.

2. Any student who has been classified as a nonresident student and who claims that his or her status has changed during attendance at the institution may request the Residency Officer for a reclassification, submitting relevant evidence in support of this claim. Based upon relevant evidence, the institution may request the Residency Officer to reclassify a student, if the student's status has changed during attendance at the institution.

If the Residency Officer determines that the student has become a resident, the student shall be classified as a resident student effective with the beginning of the semester next following the determination. Decisions on classification will be communicated to the student in written form. Requests for a change of classification will not be considered more than once in any semester.

3. Any student who is classified as a nonresident student by the Residency Officer may, by filing a written request with the Residency Officer within 30 days of receipt of notification of the classification, appeal the Residency Officer's decision to the Board of Residency Review. The Residency Officer shall thereupon transmit the record, including a statement of the reasons for the decision to the Board of Residency Review, and the board shall decide the appeal upon the record together with such additional written information as the student may furnish or the board may require. The Board of Residency Review shall hold an informal hearing. The decision of the Board of Residency Review shall be final.

E. PENALTIES

Misrepresentation of facts in order to qualify for resident student classification shall be considered cause for suspension or permanent exclusion from a public college or university. Moreover, it may subject the student to criminal prosecution.



UNIVERSITY OF
Rhode Island

Graduate School Transcript Request Form

Applicant: Complete this form and present to the registrar. (Please print or type.) If you are requesting more than two transcripts, photocopy this page prior to completing the forms.

To the Registrar _____
College or University

Please attach this form to the transcript requested and send to the student at the address listed below in an official envelope, sealed and signed across the flap. The student will then forward the sealed envelope to our office as part of his or her complete application for admission.

Transcript of _____ Social Security # ____ - ____ - ____

Years Attended _____ Degree Received _____

Current Address _____



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Years Attended _____ Degree Received _____

Current Address _____



UNIVERSITY OF
Rhode Island

Graduate School Letter of Recommendation Request Form

To be filled in by applicant. (Please print or type.) If you are requesting more than two recommendations, photocopy this page prior to completing the forms.

Return to Applicant by _____ (Applicant: Allow time to complete and mail your application by the deadline.)

Name _____ Social Security # _____ - _____ - _____

Current Address _____

Proposed Plan and Degree _____

Name of Referee _____ Title/Position _____

To the referee: We would appreciate your opinion of this applicant for graduate study in her or his chosen discipline. Please indicate the length of time and in what capacity you have known the applicant, and include comments on her or his strengths and weaknesses, creativity, initiative, and aptitude for advanced study. Any other relevant information you care to include will be welcomed. Please attach this form to the letter of recommendation requested, and send to the student at the address given above in an official envelope from your own institution, sealed and signed across the flap. The student will then forward the sealed envelope to our office as part of his or her complete application for admission. Your prompt reply (see deadline date provided by the applicant) will be appreciated.

The Family Educational Privacy Act of 1974 and its amendments guarantee students access to educational records concerning them. Students are permitted to waive their right of access to recommendations. The following statement indicates the wish of the applicant regarding this recommendation.

I waive _____ I do not waive _____ my right to inspect the contents of this recommendation.

Signature _____ Date _____

Note: This waiver is not required as a condition for admission to the University of Rhode Island or as a receipt of financial aid or any other services and benefits. It is University policy that all letters of recommendation be used for admission purposes only.



UNIVERSITY OF
Rhode Island

Graduate School Letter of Recommendation Request Form

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Return to Applicant by _____ (Applicant: Allow time to complete and mail your application by the deadline.)

Name _____ Social Security # _____ - _____ - _____

Current Address _____

Proposed Plan and Degree _____

Name of Referee _____ Title/Position _____

To the referee: We would appreciate your opinion of this applicant for graduate study in her or his chosen discipline. Please indicate the length of time and in what capacity you have known the applicant, and include comments on her or his strengths and weaknesses, creativity, initiative, and aptitude for advanced study. Any other relevant information you care to include will be welcomed. Please attach this form to the letter of recommendation requested, and send to the student at the address given above in an official envelope from your own institution, sealed and signed across the flap. The student will then forward the sealed envelope to our office as part of his or her complete application for admission. Your prompt reply (see deadline date provided by the applicant) will be appreciated.

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UNIVERSITY OF
Rhode Island

Graduate School Notification Sheet

Application received on ____ / ____ / ____

Your application is complete.

As of _____, _____, the following credentials have not been received:

Application Fee

Application Form, copy 1

Application Form, copy 2

Personal Statement, copy 1

Personal Statement, copy 2

Transcript 1

Transcript 2

Letter of Recommendation 1

Letter of Recommendation 2

Letter of Recommendation 3 if required

Test Scores

Residency Form or Military Orders if applicable

Other _____

Please be reminded that all credentials required for your program must be received prior to that program's deadline. Applications and documents received after the stated deadline cannot be assured of consideration for the requested term of admission. **Inquiries concerning the further status of your application should be directed to the department or program to which you are applying.**

Admission decisions are made by the Dean of the Graduate School, and you will receive official notification of the decision by letter. **We regret that our interpretation of the Privacy Act prohibits disclosure of admission decisions by telephone.**

Contact your department if you have further questions.



MASTER OF ARTS

Communication Studies
Education
English
History
Marine Affairs
Political Science
Spanish

MASTER OF SCIENCE

Accounting
Biochemistry (see Cell and Molecular Biology)
Biological Sciences

- Botany
- Zoology

Cell and Molecular Biology
Chemical Engineering
Chemistry
Civil and Environmental Engineering
Clinical Laboratory Science
Computer Science
Electrical Engineering
Entomology (see Environmental Sciences)
Environmental and Natural Resource Economics
Environmental Sciences

- Entomology
- Geosciences
- Natural Resources
- Plant Sciences

Fisheries, Animal and Veterinary Science
Geosciences (see Environmental Sciences)
Human Development and Family Studies

- College Student Personnel
- Human Development and Family Studies
- Marriage and Family Therapy

Kinesiology
Labor Relations and Human Resources
Manufacturing Engineering
Mathematics
Mechanical Engineering and Applied Mechanics
Microbiology (see Cell and Molecular Biology)
Natural Resources (see Environmental Sciences)

Nursing
Nutrition and Food Sciences
Ocean Engineering
Oceanography
Pharmaceutical Sciences

- Medicinal Chemistry and Pharmacognosy
- Pharmaceutics and Pharmacokinetics
- Pharmacoepidemiology and Pharmacoeconomics
- Pharmacology and Toxicology

Physical Therapy
Physics
Plant Sciences (see Environmental Sciences)
Psychology: School
Speech-Language Pathology
Statistics
Textiles, Fashion Merchandising, and Design

DOCTOR OF PHILOSOPHY

Applied Mathematical Sciences
Biological Sciences

- Botany
- Zoology

Business Administration

- Finance and Insurance
- Management
- Management Science
- Marketing

Cell and Molecular Biology
Chemical Engineering
Chemistry
Civil and Environmental Engineering
Computer Science
Education
Electrical Engineering
English
Environmental and Natural Resource Economics
Environmental Sciences

- Entomology
- Fisheries, Animal and Veterinary Science
- Geosciences
- Natural Resources
- Plant Sciences

Industrial and Manufacturing Engineering
Marine Affairs
Mathematics
Mechanical Engineering and Applied Mechanics
Microbiology (see Cell and Molecular Biology)
Nursing
Nutrition and Food Sciences
Ocean Engineering
Oceanography
Pharmaceutical Sciences

- Medicinal Chemistry and Pharmacognosy
- Pharmaceutics and Pharmacokinetics
- Pharmacoepidemiology and Pharmacoeconomics
- Pharmacology and Toxicology

Physics
Plant Sciences (see Environmental Sciences)
Psychology

- Clinical
- Experimental
- School

PROFESSIONAL DEGREES

Master of Business Administration (M.B.A.)
Master of Environmental Science and Management (M.E.S.M.)

- Conservation Biology
- Earth and Hydrologic Science
- Environmental Policy and Management
- Remote Sensing and Spatial Analysis
- Sustainable Systems
- Wetland, Watershed and Ecosystem Science

Master of Library and Information Studies (M.L.I.S.)
Master of Marine Affairs (M.M.A.)
(Also joint M.M.A./J.D.-RWU)
Master of Music (M.M.)
Master of Oceanography (M.O.)
Master of Public Administration (M.P.A.)
(joint URI-RIC)
Doctor of Physical Therapy (D.P.T.)



Graduate School Financial Assistance Application

This form should be used by applicants seeking admission to the Graduate School who also wish to be considered for financial assistance. To be eligible for any form of assistance you must first be admitted to the Graduate School. To be considered for all forms of financial assistance this form and your completed application must be received by the department or plan to which you are applying **by the due dates indicated on page 1 of this application.**

Graduate assistantship appointments are initiated by the department chairperson and research assistantships are initiated by the Principal Investigator of the grant involved. Financial need may be a criterion for scholarships, fellowships, and graduate assistantships, but is not a consideration for research assistantships.

Indicate type(s) of awards for which you wish consideration:

- 1) Tuition Scholarships — Awarded to qualified students demonstrating financial need.
- 2) Fellowships — Awarded in recognition of achievement and promise as doctoral scholars.
- 3) Graduate Assistantships — Awarded to provide teaching and research training; URI sponsored.
- 4) Graduate Research Assistantships — Awarded to provide research training; GRANT sponsored.

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Social Security Number (if you have one)

Program for which you are applying _____
(see page 10 of admission application)

Applicant Name (Please Print) _____

Applicant's Signature _____ Date _____