# **Graduate TAF Application Form New TAF**

## **MS in Integrated Biological Diversity**

### **Western Connecticut State University**

Department of Biology 181 White Street, Danbury, CT 06810

GENERAL INFORMATION:
NAME:
ADDRESS:
UNDERGRADUATE COLLEGE/UNIVERSITY:
MAJOR:
GRADUATION DATE/YEAR:
GPA:
NAME OF REFEREE PROVIDING LETTER OF RECOMMENDATION:
FULL-TIME/PART-TIME:
MA PROGRAM START DATE:
# OF CREDITS ENROLLED:

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INSTRUCTIONS: Your app	lication s	hould inc	lude the	following	components.
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<ul> <li>The Application Form (this document)</li> <li>One Letter of Recommendation</li> <li>Your Current Resume</li> <li>An Unofficial Transcript from either your Undergraduate Institution (new students) or from</li> </ul>
WCSU (continuing students)
APPLICATION SEMESTER: FALL or SPRING (circle one)
APPLICATION YEAR:
HAVE YOU EVER RECEIVED A GRADUATE TAF BEFORE: YES or NO (circle one)
IF YES, IN WHICH SEMESTER AND ACADEMIC YEAR?
Please Answer the Following Questions:
1. What interests you in teaching undergraduate biology?
2. How does teaching and/or science communication fit into your career goal?

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Please email your completed application in the form of a single PDF file to ibdcoordinator@wcsu.edu.by March 15th (Fall Applications) or October 15th (Spring

Applications).	(Full Applications) of October 15" (Spring
By typing my name in the space below, I verif application, and that all answers provided are	fy that I created the material submitted in this e true:
Applicant Signature	Date