

UNIVERSITY OF ALASKA FAIRBANKS

Field Camp Part 1 Application - **Non UAF Student**

Department of Geosciences
Box 755780
Fairbanks, Alaska 99775-5780
Phone (907) 474-7809

DUE MARCH 4, 2024

Full Legal Name:

last or family name

first

middle

Date of Birth:

Current Mailing Address:

Current Until (date):

Current Phone: ()

Permanent Mailing Address:

Permanent Phone: ()

Email Address:

Emergency Contact Person:

Relationship:

Address:

Phone: ()

POST SECONDARY EDUCATION *Please list below all universities and colleges attended:*

University/College Name	City and State	Dates Attended	Credits Earned	GPA	Degree & Date Earned/Expected

Prerequisites: C or better in Petrology and Stratigraphy & Sedimentation.
Must have Junior Standing and permission of instructor.

Please attach a copy of official transcript(s).

GEOLOGY COURSE WORK *Please list below all Geoscience classes taken **and include classes you are currently enrolled in:***

University/College Name	Course Name	Course Number	Date Taken	Credits Earned	Grade

ALL APPLICANTS PLEASE READ AND SIGN THE FOLLOWING:

I understand that withholding information requested on this application may make me ineligible for admission to the University of Alaska system or subject to dismissal. With this in mind, I certify that the above statements are correct and complete and if admitted, I agree to abide by the published policies, rules and regulations of the University of Alaska system, its campuses and sites. I further understand that from the time I file my application with the University of Alaska system, it is my responsibility to know all rules, requirements of and exemptions from my intended degree program.

MEDICAL INSURANCE IS NOT REQUIRED, BUT HIGHLY RECOMMENDED. THE COST OF NON-ACCIDENT-RELATED MEDICAL AND EVACUATION FEES WILL BE BORNE SOLELY BY THE APPLICANT.

UNIVERSITY OF ALASKA FAIRBANKS

Field Camp Application – Applicant Evaluation

Department of Geosciences
P.O. Box 755780
Fairbanks, Alaska 99775-5780
Phone (907) 474-7809

Name of Applicant _____ Applying for GEOS 495 Field Geology Pt.1

To the Applicant: The Family Educational and Primary Act of 1974 gives students the right to inspect letters of recommendation written in support of applicants for admission or fellowship. The law also permits students to waive that right if they choose, although such a waiver cannot be a condition of admission or award. If you wish to waive your right to examine this letter of recommendation, please sign the waiver below.

I waive my legal right to inspect this letter of recommendation.

Date _____ Signature _____

Evaluator:

I know the applicant: very well; moderately well; only slightly.

I have known the applicant for approximately ____ years.

During this time the applicant was an:

undergraduate student, graduate student.

assistant of mine, advisee of mine, departmental assistant.

other (please specify) _____

To the Evaluator: Please mail or email to Dr. Jochen Mezger, Department of Geosciences University of

I would compare the applicant with other students of the same level as follows:

	Exceptional	Above Average	Average	Below Average	No Information
Intellectual Ability					