University of Utah
APPLICATION FOR ADMISSION
DEPARTMENT OF BIOMEDICAL INFORMATICS

CERTIFICATE IN INFORMATICS

Instructions:

1. Submit this application form to the Department of Biomedical Informatics via email to:
bmi-admissions@lists.utah.edu
2. Along with this application form, submit scanned copies of your transcripts.
3. Send the *Reference Form* to two references to complete and have them return the forms by email to the address listed on the form.
4. Do not apply for Admission to the University of Utah until you have been advised you are being recommended for Admission to the Certificate in Informatics by the Department of Biomedical Informatics.

Thank you very much for applying to the Biomedical Informatics Certificate Program.

LAST NAME: _____FIRST NAME:_____MIDDLE INITIAL: __

TERM APPLYING FOR: FALL 2017   SPRING 2017   FALL 2018

HOME ADDRESS:

_____

CITY: _____STATE: _____ ZIP: _____

HOME PHONE: _____CELL PHONE: _____

EMAIL ADDRESS: _____

ACADEMIC BACKGROUND:

1. UNDERGRADUATE MAJOR: _____

WHICH YEARS DID YOU ATTEND? _____

UNIVERSITY NAME, STATE AND COUNTRY:
_____

DEGREE RECEIVED: _____GPA: _____

2. UNDERGRADUATE MAJOR: _____

WHICH YEARS DID YOU ATTEND? _____

UNIVERSITY NAME, STATE AND COUNTRY:

_____

DEGREE RECEIVED: _____GPA: _____

3. GRADUATE DEGREE AND MAJOR: _____

WHICH YEARS DID YOU ATTEND? _____

UNIVERSITY NAME, STATE AND COUNTRY:

_____

GPA: _____

List the three highest-level Computer Sciences you have completed:

_____ Year _____

_____ Year _____

_____ Year _____

List the three highest-level Mathematics or Statistics courses you have taken:

_____ Year _____

_____ Year _____

_____ Year _____

EMPLOYMENT (MOST RECENT FIRST):

1. EMPLOYER:

_____

YEARS _____ LOCATION: _____

JOB TITLE/FUNCTION: _____

2. EMPLOYER:

_____

YEARS _____ LOCATION: _____

JOB TITLE/FUNCTION:

_____

SHORT STATEMENT ABOUT WHY YOU ARE INTERESTED IN THE CERTIFICATE IN INFORMATICS: