

## Combined BSAAE/MSAA Program Application Form School of Aeronautics and Astronautics

Full Name:			
PUID:	Pui	due Email Address:	
Citizenship: U.S. Citizen Country of Citizenship (if not U.S.)	_		ent? YesNo
Current Academic Level:			
1st Semester Junior (5)	2nd Semester	Junior (6)	
Semester/Year you expect to complete the	ne BSAAE degree:		
Current Cumulative GPA:			
Are you currently participating in the Pu	rdue Co-Op Program?	No Yes If yes, which semeste	ers:
Have you participated in a research pro	ject with a Purdue facul	ty member? No Yes	
If so, with which professor(s):			
	to work with:	Yes (If so, list additional information	
Name of Institution	Dates of Attendance	Degree/Certificate Program	Cumulative GPA
I certify that the information provided in this application is true and complete. I understand that omission or misrepresentation of information may result in automatic rejection of my application to the Combined BSAAE/MSAA program. If admitted, I agree to abide by the Rules and Regulations outlined in the program and I give the AAE Graduate Office permission to access my academic record.  Signature of Applicant Date:  Return this completed application to the AAE Graduate Office (mdelane@purdue.edu) by			
the designated semester of application:  • Statement of Purpos  • One completed Reco	leadline. You must att e mmendation Form re	turned by an AAE professor that you hy have done research with.	
r		FFICE USE ONLY	   
Approved: Denied:			į
AAE Graduate Chair Signature:		Date:	j