Marine Option Program
Student Information and Resource Form

Application Date:________

E-mail ____________________

Name__________________________________________

Last  First  M.I.

Student ID No. ____________

Current Address & Phone __________

____________________________________

____________________________________

Permanent Address & Phone ( )_______

____________________________________

____________________________________

Tuition Status: Resident/Non Resident

Class: Fr.,So.,Jr.,Sr.  Exp. Grad Date: _____

Declared Major:___________

Are you interested in a marine career? Y/N

Home Town:_______________

Date of birth:______ Exchange Student?__

<table>
<thead>
<tr>
<th>Schools Attended:</th>
<th>Institution &amp; Location</th>
<th>Dates of attendance, degree earned</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td></td>
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<tr>
<td>College</td>
<td></td>
<td></td>
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<tr>
<td>Professional School</td>
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</tbody>
</table>

College Level Marine related courses

<table>
<thead>
<tr>
<th>Course</th>
<th>Institution</th>
<th>Semester, Year &amp; Grade</th>
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</thead>
<tbody>
<tr>
<td>MOP Class</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ocean 201/171</td>
<td></td>
<td></td>
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<tr>
<td>Interdisciplinary</td>
<td></td>
<td></td>
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<tr>
<td>Elective 1</td>
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<tr>
<td>Elective 2</td>
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</tbody>
</table>

List special achievements such as honors and awards & certifications
Marine Experience:

Certification (Answer Yes/No, and date and type of certification)
First Aid_____, CPR_____, O2 training_____, SCUBA_____, AAUS_____
Please rate your water skills: ____________________________________________

Do you participate in the following?
Snorkel____, SCUBA____, Swim____, Windsurf____, Sail____, Surf____, Body surf____,
Canoe____, Fish____, Kayak____, Photography____, Other_____________________

Are you interested in earning a certificate through the Marine Option Program? Y/N

Do you have any ideas for a MOP project or internship, which you might be interested in?

How do you think MOP might be able to assist you academically?

How did you hear about MOP/Other comments?

You may attach additional supporting information along with this information form.

Student Signature_________________________________________

Date_____/_____/

For office use only: Date entered _______ Data-entry initials_________ Emailed letter_______ Last updated: 24 August 2011