

DEPARTMENT OF MECHANICAL AND AEROSPACE ENGINEERING
How to Apply to the Integrated BS/MS Program

Eligibility

If you have an **overall GPA of 3.0**, and an **upper division GPA of 3.5**, you are eligible to apply to the Integrated BS/MS Program.

How to Apply

Application

Complete the application below and submit it to the Graduate Student Advisor in room 181, EBUII. **The application deadline is tenth week of spring quarter.** Review of applications begins in June, after spring grades are posted. Admission is for **fall only**.

Statement of Purpose

The statement of purpose can be written on the page provided or on a separate sheet of paper. It should be no longer than one page.

Letters of Recommendation

Two letters of recommendation are required. It is recommended that they be written by faculty. If you have worked in an engineering-related position and wish to have a supervisor write a letter, we will accept a 3rd letter of recommendation.

Complete the top of the form titled 'Waiver of Access to Letter of Recommendation' (below). Give the form to your recommender and request that he/she put the form in the Graduate Student Advisor's mailbox when complete.

Transcripts

Please print a copy of your most recent transcript from Tritonlink.

Note

If admitted into the BS/MS Program, you will also need to complete the on-line application for the MS program after receiving the BS degree. The MAE Graduate Advisor can give you more information (Michelle Vavra, 534-4387, mvavra@ucsd.edu).

DEPARTMENT OF MECHANICAL AND AEROSPACE ENGINEERING
Application for Integrated BS/MS Program

Name: _____ Student ID: A_____

Address: _____ Residency Status – Please check one

_____ California Resident

Phone: _____ Non-Resident

Email: _____ International

Ethnicity: US Citizens and Permanent Residents Only. Answer is not required and is used for statistical purposes only. Please check all that apply to you.

- African-American
 Japanese/Japanese-American
 Native American or Alaska Native
 Chicano/Mexican-American/Puerto Rican
 White
 Philipino/Filipino
 Polynesian/Micronesian
 East Indian/Pakistani
 Vietnamese
 Korean/Korean-American
 Thai/Other Asian
 Chinese/Chinese-American
 Latino/Latino-American

Please check the major you wish to pursue:

- Aerospace Engineering
 Applied Mechanics
 Applied Ocean Science
 Chemical Engineering
 Engineering Physics
 Mechanical Engineering

List all institutions or colleges attended since high school including UCSD or any other campus of the UC System, regardless of the length of attendance, beginning with the latest institution attended.

Name and Location of School or College	Entered Month/Year	Type of Degree	Major	Date or Expected Date of Conferral
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Please list your proposed course plan for your final year of undergraduate study indicating the course number and name, and unit value for each course.

FALL		WINTER		SPRING	
Course Number/Name	Units	Course Number/Name	Units	Course Name/Number	Units

Current Overall GPA: _____

Current Upper-division GPA: _____

DEPARTMENT OF MECHANICAL AND AEROSPACE ENGINEERING
Integrated BS/MS Program - Statement of Purpose

Name: _____ Email: _____

If you have communicated with a faculty/staff member at MAE concerning your plans for graduate study, please indicate the individual concerned:

Please state your purpose in applying for graduate study. Include any information that may aid the Graduate Affairs Committee in evaluating your preparation and potential for graduate study. Describe your plans for future occupation or profession after graduate study. **Please limit this statement to one page.** You can use this page or attach a separate sheet of paper.

DEPARTMENT OF MECHANICAL AND AEROSPACE ENGINEERING
Integrated BS/MS Program - Letter of Recommendation

Waiver of Access to Letter of Recommendation

To Applicant: The Family Educational Rights and Privacy Act of 1974 give students (persons admitted and enrolled in the university) the right to inspect letters of recommendation written in support of an application for admission and financial assistance. In addition, the law permits students to expressly waive the right to inspect letters submitted on their behalf, although such a waiver must be voluntary and cannot be a condition of admission, award, or employment.

Name: _____ Email: _____

I have read and understand the regulation concerning Waiver of Access to Confidential Letters of Recommendation. Having read this information I choose one of the following options below:

- _____ Agree to waive access to this letter of recommendation
- _____ Do not agree to waive access to this letter of recommendation

Date: _____ Signature of applicant: _____

Name of Recommender: _____

RECOMMENDER: The applicant named above is applying for admission into the BS/MS Integrated Program. Please evaluate this student in the space provided below.

Recommender's Name:
Please Print: _____

Phone: _____
Email: _____

Position or Title: _____

Dept.: _____

Signature: _____

Date: _____

Letters filed without a signed waiver form are presumed to be available for review by applicants who become registered students at UCSD under provisions of the Family Educational Rights and Privacy Act of 1974.

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RECOMMENDER: The applicant named above is applying for admission into the BS/MS Integrated Program. Please evaluate this student in the space provided below.

Recommender's Name: _____ Phone: _____
Please Print: _____ Email: _____
Position or Title: _____ Dept.: _____
Signature: _____ Date: _____

Letters filed without a signed waiver form are presumed to be available for review by applicants who become registered students at UCSD under provisions of the Family Educational Rights and Privacy Act of 1974.