Lowell Institute for Mineral Resources Certificate in Mining Studies

Return to: pbosco@email.arizona.edu 1235 E. James E. Rogers Way P.O. Box 210012 – Mines 209 The University of Arizona Tucson, AZ 85721-0012

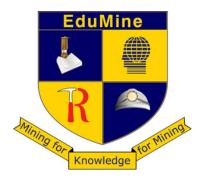
Ph # (520) 621-5259

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Home Address:			
110mc /1dd1 c55.			
	State		
Company Name:			
Work Address:			
City	State	Zip Code	
Telephone:	Cell Phone:		
Fax Number:		_	
Email Address:			
Date of Birth (needed f	or computer account) Mor	nth Day	Year
Highest degree received	d to date. Degree	Major	Cum. GPA _
University	Date Rec	ceived	

This is a non-credentialed professional certificate. A transcript is issued by the CMS program but an official university transcript is not issued. Courses do not transfer into degree programs at universities.





CURRENT A	AND PAST EXPERIENCE IN THE MINING INDUSTRY (hit return
t end of eac	h line and select next line to continue text)
	LD YOU LIKE TO PARTICIPATE IN THE CMS PROGRAM? (hit
eturn at end	d of each line and select next line to continue text)

HOW WILL THE CMS BENEFIT YOUR CAREER? (hit return at end of each line and select next line to continue text)
HOW LONG DO YOU ANTICIPATE IT WILL TAKE YOU TO COMPLETE
THE CMS PROGRAM?

PLEASE EMAIL YOUR CURRENT RESUME AND AN UNOFFICIAL COPY OF THE TRANSCRIPTS FROM YOUR PREVIOUS DEGREES.