

Certificate in Museum Studies

Intake Form

Museum Studies Program, 77 E Main Street, Newark DE 19711 (302) 831-1251
Katherine Grier, Program Director
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IMPORTANT! To apply for admission to the program, please return this form to: Museum Studies Program Name: _____ Today's Date: _____ Student ID: _____ Local Address: City/State/Zip: Permanent Address: _____ City/State/Zip:_____ Home Phone: Cell Phone: E-mail Address: _____ Prior Education – Institution, Degree(s)/Major(s) & completion dates: Area of special interest? UD Graduate Program & Department you are entering: Advisor: _____

Expected Graduation Date: _____

Enrollment Date: Fall _____Spring ____