

Institute of Cognitive Science

Application for Admission to the:

___ *Cognitive Science Undergraduate Certificate Program*

___ *Cognitive Science Graduate Certificate Program*

___ *Human Language Technology Certificate Program*

___ *Ph.D. in Cognitive Science*

___ *Combined Cognitive- Neuroscience Triple Ph.D*

Name *Withhold contact info from ICS website* Department

CU Student Number E-mail Address

Mailing Address Graduate Status – **Circle one**
Undergraduate, MS, MA,
Pre comp Ph.D., Post comp Ph.

Permanent Address (if different from mailing address) Academic/Research Website URL

Ethnic Group: **(Selection Required—Circle One)** *Asian* *Native Hawaiian/Pacific Islander*
Black or African American *Caucasian*
American Indian/Alaskan Native *Hispanic/Latino* *Chose Not to Disclose*

Research Interests:

See ICS website for specific classes required to complete the Certificates and Ph.d. Programs.

To complete this application: attach unofficial transcript and tentative Plan of Study.

*Faculty Sponsor: _____ Department: _____
(*not required for Undergraduate Certificate Program)

Faculty Signature (Certificates/HLT/Ph.D.): _____ Date: _____

Submit to the ICS Office for review and acceptance into the program.

Accepted to Program Yes No

Academic Program Director: _____ Date: _____