



**Universidad Central del Caribe  
Graduate Student Association  
Membership Application**

**Instructions**

Thanks for your interest in GSA. In order to become a member, please complete this form and submit by email in PDF format to [GSA@uccaribe.edu](mailto:GSA@uccaribe.edu).

**A. Applicant's Information**

|                  |         |
|------------------|---------|
| Applicant's name | Email   |
| Year of study    | Phone   |
| Program of Study | Address |

**B. Education**

| Institution and Location | Degree | Year(s) | Field of Study |
|--------------------------|--------|---------|----------------|
|                          |        |         |                |

**C. Personal Statement**

Please describe briefly (one page limit):

- a. Your interest in the education field.
- b. The level at which you would like to work (middle/high school or undergraduate).
- c. Your interest in community outreach activities.
- d. How will you contribute to the mission of the association?

**D. Research Experience**

**E. Other work experience**

**F. Honors and Awards**

**G. Community and extracurricular activities**

**G. Applicant's Certification**

I certify that the information provided is accurate and correct to the best of my knowledge.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|