## ANNEX II

**REGISTRATION FORM FOR ADMISSION TO THE ACADEMIC MASTER’S PROGRAM IN PLANT PRODUCTION AND ASSOCIATED BIOPROCESSES**

**– UFSCar – IN THE 1st SEMESTER 2024**

**Personal data:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request the use of Social Name: ( ) Yes ( ) No

If yes, Social Name: Address: Number: Complement: ZIP Code: City: State: Home phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

email address: Marital status: Date of birth: \_\_\_ / \_\_\_\_ / \_\_\_\_ Nationality: Place of birth: Mother’s name: Father’s name: RG (or RNE): Issuing agency: CPF: **University education:**

Course: Institution: Year of entry: Year of diploma:

## Link with program professors

See Annex V and the List of professors accredited to PPGPVBA-Ar (see in the notice item 1.4). Indicate only the link type number.

Professor PhD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Link(s): \_\_\_\_\_\_\_\_\_\_

Professor PhD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Link(s): \_\_\_\_\_\_\_\_\_\_

Professor PhD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Link(s): \_\_\_\_\_\_\_\_\_\_

**Option for project defense – Step 2 (in case of approval in Step 1)**

( ) By Google Meet ( ) In person (At UFSCar – Araras *campus*)

I declare to be aware of the terms contained in the Selection Notice for Admission to the Academic Master’s Degree Program in Plant Production and Associated Bioprocesses - Centre for Agricultural Sciences - Federal University of São Carlos - in the first academic semester of 2024, published at <https://www.ppgpvba.ufscar.br/en/selection-process/regular-students?set_language=en>

Araras, Month, Day, 2023

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Signature of Applicant