



SCHOOL OF OPTOMETRY

INDIANA UNIVERSITY

Graduate Program in Vision Science

Name: _____

Address: _____

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Which degree are you seeking? MS PhD

During which semester/year do you plan to start? _____

The IU domestic graduate application fee is \$50.00 and is non-refundable.
Domestic applicants should mail the fee directly to:

Indiana University
University Graduate School
130 S. Woodlawn Ave.
Kirkwood Hall 111
Bloomington, IN 47405-2801

Include the following information on your check:

- Make payable to "Indiana University"
- Write your date of birth on the check
- Write "For MS or PhD Program" on the check
- Write the semester you plan to attend; e.g., "Entering Fall 2009" on the check