**University at Albany**

**State University of New York**

**Department of Atmospheric and Environmental Sciences**

**Atmospheric Science Program**

**PhD Exam**

**DAY MONTH YEAR**

***STUDENT NAME***

Please choose to answer, and submit your responses to, three out of the four questions provided. Only answers to these three questions will be evaluated.

If submitting handwritten answers, start the answer to each question on a separate page, number the pages of each answer, and write your name on each page.

If typing your answers on laptop (by prior approval ONLY), submit each answer as a separate, appropriately labeled, document.