

DEPARTMENT OF CHEMISTRY
COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK

NATIONAL SCIENCE FOUNDATION
RESEARCH EXPERIENCES FOR UNDERGRADUATES

STUDENT APPLICATION FORM

THE DEADLINE FOR RECEIPT OF APPLICATIONS IS FRIDAY, FEBRUARY 29, 2008

Applications may be returned as email attachments, by fax, or by mail/express.

<u>Email</u>	<u>Mail/Express</u>	<u>Fax</u>
undergradchem@columbia.edu	NSF-REU Program Department of Chemistry Columbia University 3000 Broadway, MC 3174 New York, NY 10027	212-854-1688

PERSONAL INFORMATION (REQUIRED)

First Name: _____ Last Name: _____
Date of Birth (dd/mm/yyyy): _____
U.S. Citizen: Yes No Permanent Resident: Yes No

Address, Phone, and Email (February to May 2008)

Street: _____ City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Permanent Address, Phone, and Email

Street: _____ City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

PERSONAL INFORMATION (NOT REQUIRED)

This information is requested for NSF statistical analysis only. No personal information about you as an individual will be revealed. Please see the waiver at the end of this application form.

Gender: M F
Ethnicity/Race: White, not of Hispanic origin Hispanic
 African/American, not of Hispanic origin Asian
 Native American Pacific Islander

COLLEGE/UNIVERSITY ATTENDANCE

College/university in which you are currently enrolled

Name: _____ City: _____ State: _____ Zip: _____
Dates of attendance (mm/yyyy): From: _____ To: _____
Years of college completed by June 1, 2008: _____ Expected graduation date (mm/yyyy): _____
Major: _____ GPA: _____

College/university in which you were previously enrolled (if applicable)

Name: _____ City: _____ State: _____ Zip: _____
Dates of attendance (mm/yyyy): From: _____ To: _____

COLLEGE/UNIVERSITY COURSEWORK

A transcript is not required at this time, but if you are admitted into the program and accept admission you will be asked to provide a transcript prior to the start of the program on June 2.

Please list all the courses you have taken in each of the following subjects, giving the number of terms taken, and the grades you received.

Chemistry Courses

<u>Course Name & Number(s)</u>	<u>Number of Terms Taken</u>	<u>Grade(s) Received</u>
------------------------------------	------------------------------	--------------------------

Mathematics Courses

<u>Course Name & Number(s)</u>	<u>Number of Terms Taken</u>	<u>Grade(s) Received</u>
------------------------------------	------------------------------	--------------------------

Physics Courses

<u>Course Name & Number(s)</u>	<u>Number of Terms Taken</u>	<u>Grade(s) Received</u>
------------------------------------	------------------------------	--------------------------

Biology Courses

<u>Course Name & Number(s)</u>	<u>Number of Terms Taken</u>	<u>Grade(s) Received</u>
------------------------------------	------------------------------	--------------------------

Other Science Courses

<u>Course Name & Number(s)</u>	<u>Number of Terms Taken</u>	<u>Grade(s) Received</u>
------------------------------------	------------------------------	--------------------------

RESEARCH INTERESTS

If selected as a participant in our REU program, what areas of chemistry research will be of interest to you this summer? Please select up to three areas from the following list, entering the number "1" for your first choice, "2" for your second choice, and "3" for your third choice.

Biological	Inorganic	Organic	Physical	Theoretical
-------------------	------------------	----------------	-----------------	--------------------

If there are specific faculty in our Department whose research is of particular interest to you, please list them here by last name, in order of preference. Descriptions of faculty research can be accessed through links at the Chemistry Department home page, www.columbia.edu/cu/chemistry/.

First Choice:**Second Choice:****Third Choice:****LETTERS OF RECOMMENDATION**

THE DEADLINE FOR RECEIPT OF LETTERS OF RECOMMENDATION IS FRIDAY, FEBRUARY 29, 2008

Please provide contact information for two people who will write letters of recommendation on your behalf. Even though we are asking for this information, it is your responsibility to request that letters be sent to us by these references. Letters need to be prepared using the Letter of Recommendation form provided at our web site, www.columbia.edu/cu/chemistry/undergrad/REU/index.html.

Recommender 1

First Name:

Last Name:

Title:

Institution: San Francisco State University

Street:

City:

State:

Zip:

Email:

Phone:

Recommender 2

First Name:

Last Name:

Title:

Institution:

Street:

City:

State:

Zip:

Email:

Phone:

WAIVER

I hereby grant the NSF-REU program permission to use the information I have provided here, with the proviso that none of this information about me will be accessible to anyone other than the qualified researchers performing the aggregation of information from all applicants and the statistical analysis of that aggregate data, and that these researchers will not report, disclose, or publish any specific information about me individually.

Accept Reject

Your willingness to participate in this statistical survey will aid the development of this federally funded program. However, your acceptance or rejection of this waiver will in no way affect consideration of you for admission to our REU program.

PERSONAL STATEMENT

Please describe your reasons for wanting to participate in our REU program, your research interests and research experience, and your post-graduate career plans.

SIGNATURE

If submitting electronically, please type your full name in the "Signature" field. If submitting in hard copy, please sign in ink.

Signature:

Date (dd/mm/yyyy):

THE DEADLINE FOR RECEIPT OF APPLICATIONS IS FRIDAY, FEBRUARY 29, 2008