Virginia Commonwealth University

Department of Chemistry Box 842006 Richmond, VA 23284-2006

Application for Summer REU Program "Practices and Perspectives"

I. PERSONAL INFORMATION

1. Name: _____ 2. Social Security Number: _ _ _ - _ _ - _ _ _ _
   Last First M.I.
3. School Address: _____
   Number and Street (or PO Box) City State or Country Zip Code
4. Permanent Address: _____
   (if different from above) Number and Street (or PO Box) City State or Country Zip Code
5. E-mail address _____ 6. Phone: (____) _____ 7. Phone: (____) _____
   Area Code school phone Area Code home phone
8. Ethnicity (optional): ☐ Black non-Hispanic ☐Amer. Indian/Alaskan Native ☐ Asian/Pacific Islander
   ☐ Hispanic ☐White non-Hispanic ☐Other_____
9. Citizenship: ☐ U.S. Citizen ☐ Permanent resident ☐Non-U.S. Citizen, Country: _____
10. Date of Birth: _____

II. EDUCATIONAL BACKGROUND

11. List below all colleges or universities you have attended, the dates of attendance (month and years), the major, degree (B.S. etc.) and the date (or expected date) of graduation.

Name of School and Location	Dates attended	Major	Degree	Date

12. During the 2011-2012 academic year, indicate your expected class level: ☐Senior ☐Junior ☐Sophomore
13. Enter your current grade point average (GPA) and have an **official transcript** sent to the address listed below.
    Cumulative GPA _____ Chemistry GPA _____

III. INTERESTS AND CAREER AIMS

14. Research projects are available in all areas of chemistry and chemical engineering. Please indicate your general interests in the following focus areas: ☐ synthesis ☐ analysis ☐ molecular modeling
15. Indicate your career plans after graduation:
    ☐ Graduate school ☐ Medical school ☐ Employment in industry ☐ Other _____
16. On a **separate page**, please provide a brief summary of your career goals and describe how your education and training has prepared you for these goals. (limit to one page)

IV. RECOMMENDATIONS

17. Provide the name, address and phone number of **two** faculty members from whom which you have requested a letter of recommendation. Please have them use the recommendation form provided in the application package.

Name of recommender	Address	Phone Number	Email address

Send your application, statement of career goals, official transcript and letters of recommendation to the address listed below.

Send to :	Practices and Perspectives REU Program Department of Chemistry Box 842006 Virginia Commonwealth University Richmond, VA 23284-2006

Inquiries to:
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FAX (804)-828-8599