

**THE UNIVERSITY OF IOWA  
DEPARTMENT OF CHEMISTRY  
APPLICATION FOR  
GRADUATE TEACHING AND RESEARCH ASSISTANTSHIPS**

Name of Applicant: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Present Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Telephone No. Daytime: \_\_\_\_\_ Telephone No. Evening: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ FAX No. \_\_\_\_\_

Gender:  Male  Female Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Citizenship:  U.S. Citizen  U.S. Permanent Resident  Other \_\_\_\_\_  
Country of Citizenship

Degree Objective:  Ph.D.  M.S.

College Attended:	Dates Attended	GPA	Degree
_____	_____	_____	_____
_____	_____	_____	_____

GRE Scores/Percentiles: Verbal \_\_\_\_\_ Quantitative \_\_\_\_\_ Analytical \_\_\_\_\_ Advanced \_\_\_\_\_

If GRE not available, indicate date of examination: \_\_\_\_\_

Honors, teaching experience, research experience, or other pertinent information:

Area of chemistry that is of the most interest to you as a field of graduate research: \_\_\_\_\_

Names and addresses of three professors that you are asking to write letters of recommendations:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

When do you plan to begin your graduate work? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

The University of Iowa Department of Chemistry requests the above information for the purpose of making a decision about your application. No other University personnel are routinely provided with this information.

Please mail this application, transcripts, and letters of recommendation to: **Graduate Admissions Committee, Department of Chemistry, The University of Iowa, Iowa City, IA 52242-1294**