

Application Instructions & Checklist:

**The University of Chicago
Department of Physics &
Materials Research Science & Engineering Center (MRSEC)**

2012 Summer Research Experience for Undergraduate Programs

Be sure your application is complete & contains the following:

- 2 pages of personal and college information
- personal statement
- 2 letters of reference (or arranged to be mailed directly by reference)
- recent official transcript (or arranged to be mailed directly by registrar)
- any additional material that you feel will provide us with a more complete picture of who you are (optional)

**Mail your application to the address below
on or before February 15, 2012**

The University of Chicago REU Program
Attn: Ms. Brenda Thomas
929 E. 57th Street
Chicago, IL 60637-1433
FAX: 773-702-5863
e-mail: bthomas@uchicago.edu

The University of Chicago

Department of Physics & Materials Research Science & Engineering Center (MRSEC)

2012 Summer Research Experience for Undergraduate Programs

Application Deadline: February 15, 2012

NAME (LAST, FIRST MI)			<input type="radio"/> MALE <input type="radio"/> FEMALE
PRESENT COLLEGE OR UNIVERSITY			
MAJOR FIELD OF STUDY	CURRENT YEAR OF STUDY 1 2 3 4	EXPECTED GRADUATION DATE (MONTH, YEAR)	
COLLEGE ADDRESS:		HOME ADDRESS:	
_____		_____	
_____		_____	
_____		_____	
E-MAIL: _____		_____	
COLLEGE PHONE: _____		HOME PHONE: _____	
DATE OF BIRTH (MM/DD/YYYY)	PLACE OF BIRTH (CITY, COUNTY, COUNTRY)		
CITIZENSHIP (MUST BE US CITIZEN OR PERMANENT RESIDENT):		SOCIAL SECURITY NUMBER: _____	
<input type="radio"/> U. S.	ETHNICITY: (OPTIONAL)		
<input type="radio"/> OTHER _____ (COUNTRY)	<input type="radio"/> AFRICAN-AMERICAN	<input type="radio"/> HISPANIC	
<input type="radio"/> U. S. PERMANENT RESIDENT	<input type="radio"/> ASIAN-AMERICAN	<input type="radio"/> NATIVE AMERICAN	
	<input type="radio"/> CAUCASIAN	<input type="radio"/> OTHER _____	

OTHER ACADEMIC INFORMATION:

OVERALL GPA	GPA IN PHYSICAL SCIENCE AND MATH-RELATED SUBJECTS
PREVIOUS COLLEGES OR UNIVERSITIES ATTENDED	

HAVE YOU PARTICIPATED IN AN REU PROGRAM BEFORE?	IF SO, WHEN? & WHERE?
_____	_____

Please indicate your research area(s) of interest. Students may be placed in either the Physics or the MRSEC REU program.

<input type="checkbox"/> Physics REU for Minorities & Women (open to everyone) <ul style="list-style-type: none"> ___ High Energy Physics ___ Condensed Matter Physics ___ Astrophysics and Cosmology ___ General Relativity ___ Biophysics ___ Applied Physics and Optics ___ Open to all research areas 	<input type="checkbox"/> MRSEC Summer REU (open to all including women and minorities) <ul style="list-style-type: none"> ___ Condensed Matter Physics ___ Nanoscience and Technology ___ Nonlinear Dynamics ___ Biophysics and Biomaterials ___ Materials Chemistry ___ Complex fluids and hydrodynamics ___ Superconductivity and Correlated Electrons ___ Open to all research areas
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Describe your specific interest under this program (e.g. experiment or theory, particular research area, or project if strong preferences exist):

Relevant Work, Life, or Laboratory Experience (employer, type of work, dates of employment, talents and practical skills, previous participation in an REU or other summer program):

Computer Experience (Please list the types of computers which you have used and any programming languages or operating systems with which you have had experience):

Please include along with this application a statement (of at least 200 words) describing your academic and research goals and how participation in a University of Chicago Summer Undergraduate Research Program would help you achieve these goals.

Please send the Application Form together with your statement to the address below:

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Also arrange to have a recent transcript and two completed recommendations forms (enclosed) sent to the appropriate address. Mark mailing instructions on the recommendation forms.

The University of Chicago
2012 Summer Research Experience for Undergraduates Programs
Letter of Recommendation

Name of applicant: _____

In accordance with the provisions of the Federal Education and Privacy Act of 1974, enrolled students have the right to see their letters of recommendation unless they have explicitly waived that right. Check one:

I waive my right of access to this recommendation. • I do not waive my right of access to this recommendation.

Signature of applicant

Date

Name of respondent (Please print)

College, University, or Company

Department

Title and Position

Note to respondent: We appreciate your candid evaluation of the applicant named above. We are interested in how long and in what capacity you have known the applicant, in your impression of the applicant's initiative, intellectual capabilities, resourcefulness, and any other specific qualities that you feel are important to judge his or her potential for further study and research leading to a career in Physics.

Signature of respondent

Date

Please mail the completed recommendation to the indicated address by February 15, 2012.

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