

Northwestern University  
Cancer Center of Nanotechnology Excellence  
**RESEARCH EXPERIENCE FOR UNDERGRADUATES (REU)**

**Application deadline: February 15**  
**Program dates: June 23—August 22, 2008**

APPLICANT INFORMATION

Name:

Date of birth:                      SSN:                      Gender:  Male  Female

School name:

Current address:                      Email:

City:                      State:                      ZIP Code:

Final date at current address:                      Telephone:

Permanent address:                      Other Email:

City:                      State:                       ZIP Code:

Citizenship (Must be a US citizen or permanent resident):  U.S. Citizen  Permanent Resident

If Permanent Resident, card number:                      Country of citizenship:

Ethnicity (This information is requested by the National Science Foundation for statistical purposes):

American-Indian       Asian       Black/African-American       Hispanic       Mexican-American  
 Native Pacific Islander       Puerto Rican       White/Caucasian       Other (specify):

ACADEMIC INFORMATION

Major(s) Field of Study:

Current Year:                      Expected Graduation Date:                      GPA/scale:

Previous colleges attended:

Have you ever participated in a research program in the past? (Please indicate all research programs)

No  
 Yes When/Where:

List any societies, fraternities, organizations, etc. you have been involved with during college:

\_\_\_\_\_

\_\_\_\_\_

REQUIRED SUPPORTING DOCUMENTS

**Official Transcript:** Only official university transcripts will be accepted.

**Two References:** Provide two letters from sources who can account for your academic and research abilities, experience and potential. Please provide contact information below.

Name	Title/Organization	E-mail Address	Telephone	Mailing Address

Northwestern University  
Cancer Center of Nanotechnology Excellence  
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**Statement of Goals:** Please include a description of the type of research in which you would most like to engage if selected for this program. Please also describe previous research experience, if applicable. (Approximately one paragraph in length; use back page, if necessary.)

**RELEVANT EXPERIENCE**

**List any relevant work or laboratory experience:**

Employer:	Previous REU? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title:	Dates of Employment:
Duties:	
Employer:	Previous REU? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title:	Dates of Employment:
Duties:	
Employer:	Previous REU? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title:	Dates of Employment:
Duties:	

**RESEARCH INTERESTS (CHECK ALL THAT APPLY)**

Chemistry	Chemical Engineering	Materials Science	Physics
<input type="checkbox"/> Organic Synthesis	<input type="checkbox"/> Polymer Chemistry	<input type="checkbox"/> Metals	<input type="checkbox"/> Experimental Condensed Matter
<input type="checkbox"/> Inorganic Synthesis	<input type="checkbox"/> Polymer Physics	<input type="checkbox"/> Biomaterials	<input type="checkbox"/> Theoretical Condensed Matter
<input type="checkbox"/> Spectroscopy	<input type="checkbox"/> Catalysis	<input type="checkbox"/> Electronic Materials	<input type="checkbox"/> Lasers
<input type="checkbox"/> Polymer Chemistry	<input type="checkbox"/> Biochemical Engineering	<input type="checkbox"/> Ceramics	
<input type="checkbox"/> Biochemistry	<input type="checkbox"/> Biomaterials	<input type="checkbox"/> Polymers	
<input type="checkbox"/> Catalysis	<input type="checkbox"/> Modeling and Simulation	<input type="checkbox"/> Computational	
<input type="checkbox"/> Theory			
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

How did you hear about this program?

Previous Program Participant     Friend     Web site:     Publication

Do you need information about housing?  Yes  No

Are you applying to other REU or internship programs?  Yes  No

If yes, please list below:

Name of program:	School/Institution:
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Name of program:	School/Institution:
Name of program:	School/Institution:

Potential conflicts with program dates:

**CCNE CONTACT**

**Please send your completed application, two letters of recommendation and an official copy of your transcript to:**

CCNE REU Program Manager  
C/O Institute of Nanotechnology  
Northwestern University  
2145 Sheridan Road, TECH K111  
Evanston, IL 60208

Telephone: 847/467-4862	Fax: 847/491-3721	Email: nanotechnology@northwestern.edu
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**Agreement:** I understand that CCNE REU participants are required to participate full-time (37.5 hours per week) during the 9-week program period. I attest that I meet the program requirements listed on this application and that I have disclosed all of the information this form is requesting of me. If accepted to this program, I agree to submit the pre and post program evaluations and a final report, which summarizes my summer research activities, by the final day of the CCNE REU program. In submitting this application, I understand that failure to disclose any requested information and/or failure to comply with the above terms and conditions may result in disqualification of and/or termination from the CCNE REU program.

Signature of applicant:	Date:
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**Thank you for applying.**