



RUTGERS

School of Arts and Sciences
DEPARTMENT OF CHEMISTRY
AND CHEMICAL BIOLOGY

PhD Students: Admission to Research, Advisor Request Form

Student's name: _____

I have spoken with the following professors about the possibility of choosing them as a research advisor (at least three signatures required).

_____	_____	_____
Name, Printed	Signature	Date
_____	_____	_____
Name, Printed	Signature	Date
_____	_____	_____
Name, Printed	Signature	Date
_____	_____	_____
Name, Printed	Signature	Date

This form is due to the Graduate Program Coordinator (CCB-1108). The Graduate Program Director will then contact the faculty named below in the order of your preference. Students will be notified of the outcome of their selections as soon as possible.

First choice: _____

Second choice: _____

Third choice: _____

Approved?

GPD Initials: _____

Date: _____