

## Department of Chemistry and Biochemistry JAMES H. MAGUIRE SCHOLARSHIP APPLICATION FORM

Name:					
Address:	(Present)				
	(Permanent)				
Phone: <u>(</u> )		Email Addres	s:		
UMD ID #:			Current GPA:		
Academic Sta	tus as of June 2015:	Freshman	Sophomore	Junior	Senior
Major:			_Minor:		
Enclose with	this application:				
-	rs <i>onal statement</i> of y d criteria.	our professiona	l/career goals and how y	our backgroun	d/plans match the
• A cu	rrent unofficial trans	script.			
• <i>Two</i> letters of recommendation (no more than one from the UMD Chemistry or Biochemistry Faculty). It is your responsibility to contact the references noted below.					
Reference Name:		Phone/Email:			
Reference Name:			Phone/Email:		
Applications should be sent to:		246 Chemistr	Minnesota Duluth ity Drive	emistry	

<u>Materials must be received by March 6, 2015</u>. Notification of awards will be made during the Spring Awards Ceremony held May 8, 2015. If you have any questions please feel free to contact Dr. Paul Kiprof (pkiprof@d.umn.edu). LATE APPLICATIONS WILL NOT BE ACCEPTED!

The University of Minnesota is an equal opportunity educator and employer.