STATE UNIVERSITY OF NEW YORK AT BINGHAMTON DEPARTMENT OF CHEMISTRY

SELECTION OF RESEARCH ADVISOR

Name of Student	
Degree Program (Ph.D., M.S., M.A.)	<u>.</u>
Before selecting your research advisor, fill in the information requested below, discresearch interests with at least three chemistry faculty members, and obtain their signatures on the bottom of this page. Then indicate your choice of advisor on the side, obtain the approval of your selected faculty member, including an agreed upor choice of curricular specialization, and turn in the form to the Graduate Program D for department approval. You are not officially signed up with any faculty member this form has been completed.	everse n irector
Placement Requirements (The student can have no more than one placement defiat the time of selecting a faculty research advisor.)	ciency
I have satisfied the following placement requirements: Analytical chemistry	-
Graduate courses taken at Binghamton University Chemistry (e.g., CHEM 531)	
Other (Biology, Geology, Materials, Mathematics, Physics, etc.)	
	·
Research Discussions Faculty signatures: Dates:	
2. 3.	

Choice of Research Advisor	
Student's Choice of Research Advisor:	
	(Please print)
Student's Signature:	·
Area of Curricular Specialization (To be selected from one of the following a	fter discussion with the Research Advisor):
Analytical chemistry □	Inorganic chemistry
Organic chemistry □	Physical chemistry
Biological chemistry	Materials chemistry □
Other (See Graduate Student Handbookspecialization")	
Research Advisor's Acceptance	
I accept this student into my research group	· ·
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Signature of Faculty Member	Date
Approval by Graduate Program Commi	ttee
. :	<u> </u>
Signature of Graduate Progra	m Director Date