



Georgia Institute
of Technology

GRADUATE

PREAPPLICATION

SCHOOL OF
CHEMISTRY AND
BIOCHEMISTRY

INSTRUCTIONS

Action will be taken only on pre-applications for which all items described below are received by the School of Chemistry and Biochemistry. Early submission is encouraged 6-12 months before the start date however, later submissions will receive complete attention. Applications completed within six months of the start date will be considered on a space-available basis. **THERE IS NO FEE FOR SUBMISSION OF THIS PREAPPLICATION IF MAILED TO THE BELOW ADDRESS.**

Please send the following items to us at:

**Graduate Coordinator
School of Chemistry and Biochemistry
Georgia Institute of Technology
Atlanta, GA 30332-0400**

- **Application Form:** Type or print using black ink. Be sure to sign the application form.
- **Non-citizen Permanent Residents:** Be sure to send a photocopy (front and back) of your permanent resident card. Georgia Tech considers you an international applicant until a copy of the card is received.
- **Official Transcripts:** Two official unopened transcripts are required from each college/university attended. Send the enclosed Transcript Request Form with any required transcript fee to each college/university you have attended. Send unopened responses(s) to us along with your application. If a college/university will not issue official transcripts directly to you, they can mail the transcripts directly to the above address. Transcripts not in English must be accompanied by a certified English translation. Degree(s) awarded must be clearly noted on the transcripts or on separate degree certificates. (IF THERE IS LIKELY TO BE A DELAY IN SENDING US OFFICIAL TRANSCRIPTS, PLEASE SEND A COPY WITH THE PREAPPLICATION).
- **Test Scores:** Test scores are to be sent directly from the testing agency to Georgia Tech. Please note that the General Graduate Record Examination (GRE) is required (the Subject GRE is optional). You may note your scores on the pre-application or include a photocopy of your scores with your application. This will expedite the application process while the official score report is being sent. Foreign students for whom English is not their first language must submit a TOEFL score directly to us. A minimum score of 600 (paper-based test) or 250 (computer-based test) or 100 (IBT) is required.
- **Personal Biography** The biography should describe your background, training and experience, mentioning honors and awards. Your biography should also state, succinctly, the reasons for pursuing a specific graduate program at Georgia Tech.

LETTERS OF RECOMMENDATION: Letters of recommendation must be sent directly from your references. While confidential letters are not required, such letters are more useful, and thus you are requested to sign the waiver on the recommendation forms prior to giving them to your references. If you are currently enrolled in a graduate program, at least one of your recommendation should be from faculty who supervise your work.

FINANCIAL ASSISTANCE: You can apply for **financial assistance** by answering "Yes" to the question: "Do you wish to be considered for financial assistance?" on the application. You will be considered for assistantships, fellowships, and other departmental assistance for which you may be eligible. International students may apply for these types of financial assistance.

PREAPPLICATION FOR GRADUATE ADMISSION
GEORGIA INSTITUTE OF TECHNOLOGY, ATLANTA, GA 30332
 A UNIT OF THE UNIVERSITY SYSTEM OF GEORGIA

Please read all instructions carefully. **Type or print neatly in dark ink, to guarantee a readable copy.** You must sign and date this application, verifying that that all information is true and correct.



1 **Have you ever enrolled as a graduate student at Georgia Tech?** Yes No *If yes, DO NOT use this form. Obtain a **Readmission** form from the Office of the Registrar, Georgia Tech, Atlanta, Georgia 30332-0315.*

2 **Department Applying To:** CHEM

3 **Full Legal Name:** _____
LAST NAME (FAMILY NAME) FIRST NAME (PERSONAL NAME) MIDDLE NAME SUFFIX (E.G. JR.)

4 **Will we possibly receive records for you under any other name?** Yes No *If yes, what name?* _____

5 **Permanent Mailing Address** 7 **Current Mailing Address** *(if different from permanent)*

Street _____ Street _____
 City _____ City _____
 State _____ Country _____ Zip _____ State _____ Country _____ Zip _____

Permanent/Home Telephone _____ Current Telephone _____
 6 **E-mail Address:** _____ Valid Until ____/____/____ (mm/dd/yy)

8 **Sex** Male Female 9 **Date of Birth** ____/____/____ (mm/dd/yy) 10 **Place of Birth** _____

11 **Race/Ethnic Group** *(check all that apply)* *(Reported to federal/state agencies to evaluate civil rights compliance.)*

American Indian or Alaskan Native Black or African American Native Hawaiian or Other Pacific Islander
 Asian Hispanic or Latino/Latina White

12 **Citizenship** 13 **State of Legal Residence (Required for U.S./PR/H-visas only)**

U.S. citizen State of Legal Residence _____
 Non-U.S. citizen If GEORGIA, County of Residence _____
 Country of Citizenship (if not U.S.): _____
 Visa Type (e.g. PR,F1,H1,J1) _____

[If Permanent Resident (PR) you must include a copy of your Alien Registration card, front and back, or you will be coded as International.]

14 **Program of Study**

A. **Planned Enrollment Term:** *(choose one)* Spring 2009 Summer 2009 Fall 2009 Other
 B. **Planned Enrollment Status:** Full-time Part-time
 C. **Planned Campus:** Main GT-Lorraine Video Transient *(currently enrolled at a U.S. institution)*
 D. **Degree Objective:** Master's* Ph.D. Special Non-Degree
 D. *If Master's, do you plan to pursue a Ph.D. in the future? Yes No *If yes, when?* Immediately Other *Explain*
 E. **Graduate Major Code or Name:** (Chem/Biochem or Paper Science or Bioinformatics)

15 **Do you wish to be considered for financial assistance?** Yes No Do you require financial assistance? Yes No

16 **Academic History**
 A. List each institution after secondary school, including Georgia Tech, that you have attended or are attending. List all post-secondary degrees which have been or will be earned by your planned enrollment date. Continue on a separate sheet if necessary. If you are currently enrolled, give the last expected date of enrollment. Official transcripts are required from each institution you attended for a year or more. Failure to comply can disqualify your application.

| NAME OF INSTITUTION | LOCATION | ATTENDANCE FROM (MM/YY) TO (MM/YY) | DEGREE & MAJOR | DEGREE DATE | GPA | CLASS RANK |
|---------------------|----------|------------------------------------|----------------|-------------|-------|------------|
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |

B. Letters of Recommendation have been requested from:

_____ of _____ (dept./institution) _____ email address
 _____ of _____ (dept./institution) _____ email address
 _____ of _____ (dept./institution) _____ email address

C. **GRE** Date taken or to be taken ____/____(mm/yy) **Scores:** V ____ (raw) ____ (%) Q ____ (raw) ____ (%) A ____
 C. **TOEFL** *(required for most non-citizens)* Date taken or to be take ____/____(mm/yy) **Score:** _____

I certify that the information provided in this document is true and complete. I understand that omission or misrepresentation of information herein may result in automatic rejection of my application to Georgia Tech. If admitted, I agree to abide by the Rules and Regulations and the Academic Honor Code of the Georgia Institute of Technology.

Signature of Applicant _____ Date _____

Transcript Request Form

**Graduate Coordinator
Georgia Institute of Technology
School of Chemistry and Biochemistry
Atlanta, Georgia 30332-0400
USA**

To the Registrar: This person is applying of admission to a graduate program at Georgia Tech. We use a self-managed application process. Please enclose this form along with requested number of official transcripts in your envelope and either sigh or place your institution’s seal on the back flap of the envelope. Please mail the transcripts to the student, who will submit them unopened to us with his or her application package.

Be sure to include instructions on how to interpret the transcript and an explanation of your grading system. If the transcript is not in English, include an English translation. If a copy of the student’s academic record cannot be forwarded, please indicate the reason. If you policy does not allow returning the sealed envelope to the student, please send it directly to us at the address given above and notify the student that you have done so.

To Be Completed By the Applicant (Please Type) – Be sure to include required transcript fees.

Name _____
Last First Middle Former, if any

Address _____

School _____

Dates of Attendance _____ Degree & Year _____

Number of Transcripts Requested (Circle correct number): 2 or 3

I authorize the release of transcripts of my academic record to the Georgia Institute of Technology.

Signature _____ Date _____

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GEORGIA INSTITUTE OF TECHNOLOGY
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PERSONAL STATEMENT FORM
GRADUATE STUDIES IN THE SCHOOL OF CHEMISTRY AND BIOCHEMISTRY
ATLANTA, GA 30332-0400

(Please print or type)

Name:

(Last)

(First)

(Middle)

Address:

(Street)

(City)

(State)

(Zip Code)

Phone:

(Home)

(Work)

Email Address: _____

Directions: This biography should describe your background, training and experience, mentioning honors, and awards. Your biography should also state succinctly the reasons for pursuing a specific graduate program at Georgia Tech. Please attach additional pages if space is needed.

I certify that the information provided in this personal statement is true and complete. I understand that omission or misrepresentation of information will result in rejection of my application to Georgia Tech.

Signature of Applicant _____ Date _____

GEORGIA INSTITUTE OF TECHNOLOGY
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LETTER OF RECOMMENDATION FORM
GRADUATE STUDIES IN THE SCHOOL OF CHEMISTRY AND BIOCHEMISTRY
ATLANTA, GA 30332-0400

This letter of recommendation has been requested from _____
Name of Respondent

by _____, who has applied for admission to the
Print Name: Last First Middle

_____MS _____Ph.D. program in Chemistry and Biochemistry for the _____ Semester 20_____.

Under the provisions of the Family Educational Rights and Privacy Act of 1974, I hereby waive my right to inspect to the recommendation given below with the understanding it will be used only for purposes of admission and initial consideration for award of financial aid.

Applicant Signature

Date

Note to Respondent: The Admissions Committee will appreciate your opinion of the applicant named above. We are interested in how long and how well you have known the applicant and in your impression of the applicant's initiative, intellectual power, analytical ability, perseverance, resourcefulness, experimental skill, ability to organize, and other qualities pertinent to graduate studies. Please attach additional pages if space is needed.

Signature of Respondent _____ Position of Respondent _____

Field of Specialty of Respondent _____ Institution _____

Mail To: Graduate Coordinator
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