

DEPARTMENT OF CHEMISTRY
University of Toronto

Application to CHM499Y Introduction to Chemistry Research

*Applications to CHM499Y should be made in the preceding Winter session. This is a fillable form. Sign your name and submit to the undergraduate office by email at chem.undergrad@utoronto.ca no later than **April 5, 2024**. Handwritten applications will not be accepted.*

Student No.	Campus <input type="checkbox"/> UTM <input type="checkbox"/> UTSc <input type="checkbox"/> St. George
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<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Given Names	Surname
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Permanent Address	Summer Address
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Tel. No.	Tel. No.
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Email address (ending in utoronto.ca)

Program of Study (please select the one you are registered in)		
<input type="checkbox"/> Biological Chemistry	<input type="checkbox"/> Chemical Physics	<input type="checkbox"/> Chemistry Specialist
<input type="checkbox"/> Synth. & Cat. Chemistry	<input type="checkbox"/> Materials Science	<input type="checkbox"/> Pharmaceutical Chemistry
<input type="checkbox"/> Chemistry Major	<input type="checkbox"/> Other (please specify) _____	

Chemistry sub-disciplines of interest: (select maximum of three and indicate order of preference, i.e. 1, 2, 3)			
<input type="checkbox"/> Analytical	<input type="checkbox"/> Biological	<input type="checkbox"/> Environmental	<input type="checkbox"/> Inorganic
<input type="checkbox"/> Materials	<input type="checkbox"/> Organic	<input type="checkbox"/> Physical	<input type="checkbox"/> Polymer

Please list ALL the courses that you intend to take in the upcoming academic session.					
<u>CHM499Y</u>	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Signature: _____

Date: _____