

## APPLICATION FOR JILA POSTDOCTORAL RESEARCH ASSOCIATESHIP

1. Full name:
2. Home address and telephone number:
3. Institution address, email, fax, and telephone numbers:
  
4. Approximate beginning date requested:
5. Degrees (give institutions and date):
  
6. Professional appointments (include present institution and position, and give dates):
  
7. Special honors or awards:
  
8. Thesis title or subject:
  
9. Names and addresses of three persons you have asked to send professional references on your behalf. If possible, one of your references should be your PhD thesis advisor.\* Please have all three letters of recommendation sent directly to the Secretary, Visiting Scientists Program, JILA, Box 440, University of Colorado, Boulder, CO 80309-0440, U.S.A. Or they may be submitted via email as an attachment on institutional letterhead to [secretary@jila.colorado.edu](mailto:secretary@jila.colorado.edu).  
\*1.  
2.  
3.
10. In the event that you are awarded a Research Associateship, will you need to obtain or renew a U.S. visa?
11. Please check the discipline(s) that best describe(s) your area(s) of interest:  

<input type="checkbox"/> Astronomy (observational)	<input type="checkbox"/> Theoretical astrophysics
<input type="checkbox"/> Geophysics/gravitational physics	<input type="checkbox"/> Chemical physics (experimental)
<input type="checkbox"/> Atomic, molecular, or optical theory	<input type="checkbox"/> Atomic/molecular physics (experimental)
<input type="checkbox"/> Precision measurement, lasers, optics (experimental)	<input type="checkbox"/> Quantum information
<input type="checkbox"/> Condensed matter physics	<input type="checkbox"/> Surface physics

Provide a few key words about your specific scientific interests and experience:
12. Names of JILA Fellows and faculty members to whose attention your application should be brought:
  
13. Will you have, or have you applied for, any additional financial support of your salary and expenses for your research at JILA? If yes, please furnish details.
  
14. Please submit the following:
  - a. A copy of the transcript of your graduate record. (An *unofficial* copy will be adequate. An official copy will ultimately be required by the University of Colorado at Boulder before an appointment can be made.)
  - b. A list of professional publication accepted or in preparation.
  - c. A resume of your research experience and current research interests.

## Postdoctoral Research Associate Affirmative Action Questionnaire

Thank you for your recent application or resume. As part of our affirmative action record keeping, JILA invites you to voluntarily provide the following information. Your reply will be kept confidential and will be used only in accordance with federal regulations. A decision not to respond to this questionnaire will not subject any applicant or employee to any adverse treatment.

Response to this form is voluntary, does not request a signature, and is necessary for record keeping.

Thank you for your help.

I am an  Asian American       Black       Hispanic

Native American       Other

I am  Female       Male

I have a handicap as defined in Section 504 of the Rehabilitation Act of 1973.\*

Yes       No

How did you hear of this position opening? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

(Month, Day, Year)

\*\* "Handicapped person" means any person who (1) has a physical or mental impairment that substantially limits one or more major life activities, (2) has a record of such an impairment, or (3) is regarded as having such an impairment.