



NYU Chemistry

### Research Interest and Rotation Form

In preparation for choosing Laboratory Rotations, students are required to meet with six faculty members during the first three weeks of the semester. **Note:** After meeting with each faculty member please have them sign this form. You must submit this form, indicating two rotation choices, by September 18<sup>th</sup>.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

NYU ID:   N   Email: \_\_\_\_\_@nyu.edu

\_\_\_\_\_  
(Print Faculty Name) (Signature) (Date)

\_\_\_\_\_  
(Print Faculty Name) (Signature) (Date)

\_\_\_\_\_  
(Print Faculty Name) (Signature) (Date)

\_\_\_\_\_  
(Print Faculty Name) (Signature) (Date)

\_\_\_\_\_  
(Print Faculty Name) (Signature) (Date)

\_\_\_\_\_  
(Print Faculty Name) (Signature) (Date)

Rotation 1: \_\_\_\_\_

Rotation 2: \_\_\_\_\_

Alternate Rotation: \_\_\_\_\_