

Application for Appointment as Postdoctoral Fellow
Oklahoma City campus Tulsa campus

Last name _____ First name _____ Middle name/Initial _____

Proposed mentor _____ Department _____

Mailing Address _____

Email address _____ Phone number _____ Alternative phone _____

Education:

Institution	Degree	Date of degree	Field of study

Research Experience:

Dates	Institution	Department	Position Title	Supervisor	Research Area

Have you been enrolled or employed at OU? Yes, currently Yes, previously No

If yes, which campus? OUHSC Norman Tulsa

Name on past records (if changed) _____

Do you have relatives employed by OU? Yes No

If yes, name and relationship _____

Are you a US citizen? Are you a permanent resident? Visa type (Form I94) _____

Estimated Start Date _____ Starting Salary _____

Signature of applicant _____ **Date** _____

Mentor Signature _____ **Date** _____

Business Manager Signature _____ **Date** _____