



CHICAGO TECHNOLOGY PARK

BiTmaP Program Tuition Sponsorship Application

MAILING ADDRESS:

Dr. Hui Lu

BiTmaP Academic Director

Dept. of Bioengineering/Bioinformatics

University of Illinois at Chicago

835 S. Wolcott, Room W103, M/C 563

Chicago, IL 60612-7340

FOR ADDITIONAL INFORMATION:

George Kozel, MBA

BiTmaP Administrative Coordinator

Phone: 312-243-1289

Fax: 312-243.1866

E-Mail: bitmap@imdc.org

Web site: <http://www.bitmapchicago.com>

1 Proposed Term of Enrollment

(check one only) Fall (August) Spring (January) Summer (May) Year _____

2 Full Legal Name

Last/Family Name/Surname First Middle

3 Indicate any name(s) you have used on previous academic records that are different from above:

Last/Family Name/Surname First Middle

4 U.S. Social Security Number: _____ - _____ - _____

Permanent Resident Card INS A#: _____ - _____ - _____

E-mail Address: _____ ; _____

5 Permanent Address:

Street Address *City State (or Country)* *Zip Code*

Home/Office _____
Area Code and Telephone Number

Mobile _____
Area Code and Telephone Number

6 Mailing Address
(If different from above)

Street Address *City State (or Country)* *Zip Code*

7 Birthdate: _____
Month *Day* *Year*

8 Sex Male Female

9 Ethnic Group

Your response is voluntary and will be used to determine Program demographic data only.

- (1) White, not of Hispanic origin
- (2) Black, not of Hispanic origin
- (3) Hispanic
- (4) Asian or Pacific Islander
- (5) Native American
- (6) Other _____
(Please specify)

10 Are you a U.S. citizen? Yes No*

Are you a Permanent Resident? Yes No*

*Attach proof of citizenship or permanent residency

*If No to both, you are ineligible for BiTmaP tuition sponsorship.

11 Are you a veteran or on active duty in the U. S. Armed Forces? Yes No

12 Employment status

Employed Employer: _____

Underemployed Employer: _____

Unemployed Last Employer: _____
Date Unemployed: _____

13 Academic Information

Are you currently enrolled at a college, university, or other educational institution?

No Yes – Institution: _____

Semester Hours Quarter Hours Courses

Number of Hours or Courses _____

Admission to BiTmaP will not be granted until official transcripts from all institutions attended have been received. Official transcripts must be sent directly to: Dr. Hui Lu, BiTmaP Academic Director, Dept. of Bioengineering/Bioinformatics, University of Illinois at Chicago, 835 S. Wolcott, Room W103, M/C 563, Chicago, IL 60612-7340. It is the student's responsibility to contact all institutions to secure forwarding of all transcripts.

List in reverse chronological order all colleges, universities, and other educational institutions you have attended since high school. Attach an additional sheet if necessary. GPA is mandatory.

Institution	Location	Dates of Attendance	Degree	Major	Cumulative GPA

14 How did you hear about BiTmaP?

15 Please read the following statement and sign where indicated

I understand that withholding information, including attendance at any other institution, requested on this application or giving false information may make me ineligible for admission to the University or subject to dismissal. I have carefully read the application instructions and the application and understand that the application fee is non-refundable if I am approved for a tuition scholarship. I acknowledge that I can be approved for a tuition sponsorship and still denied admission by the University of Illinois at Chicago. I further acknowledge that submitted materials are not returnable. I certify that all the information I have provided is complete and correct.

Signature _____ Date _____