

SECTION III: CHECKLIST

____ Completed Application Form

____ Description of Research

Compose and attach a 1-page summary of the research you propose to undertake while visiting the Shull Wollan Center and ORNL.

____ Curriculum Vitae (CV)

____ Letters of Recommendation from Sponsors

SECTION IV: SUBMITTING APPLICATION

You may email* (preferred), fax, or mail your application and requested materials to:

Shull Wollan Center
Visiting Researcher Program
Oak Ridge National Laboratory
P.O. Box 2008, MS-6453
Oak Ridge, TN 37831-6453, USA

swc-jins@tennessee.edu

Fax: +1-865-576-8631

*When emailing application materials, please send them via a secured system.

Questions regarding the application form and requested materials should be directed to swc-jins@tennessee.edu.

I certify that the information I have provided on this application form and in any attached materials is accurate to the best of my knowledge. I understand that the Shull Wollan Center may verify information included on my application. I agree to notify the Shull Wollan Center of any changes in the above information or of any further information that might affect my eligibility for consideration as a Visiting Researcher.

Signature of applicant

Date