

**MICaB PhD Program
University of Minnesota**

Research Interests and Career Goals

Applicant's Name _____

Applicant's email address _____

Which track most accurately reflects your research interests? Please select only one.

Microbiology **Immunology** **Cancer Biology** **Undecided**

Please provide the following information about yourself:

Plans for the future

Your reasons for studying microbiology, immunology or cancer biology

Your area of interest

Your experience in the field

Career objectives

Teaching or research experience

Any publications

If you are a disadvantaged student, please include a statement that describes your disadvantaged status.

Please return to:

MICaB Program Admissions
University of Minnesota
MMC 196, 420 Delaware Street SE
Minneapolis, MN 55455-0312, U.S.A.