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## RESEARCH INTERESTS

Name: \_\_\_\_\_

ID #: \_\_\_\_\_

1. Please indicate areas of research interest:

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|--|---|
| <input type="checkbox"/> Analytical chemistry          | <input type="checkbox"/> Hematology / Hematopathology         |
| <input type="checkbox"/> Anatomical pathology          | <input type="checkbox"/> Host-pathogen interaction            |
| <input type="checkbox"/> Cancer pathology              | <input type="checkbox"/> Molecular pathology                  |
| <input type="checkbox"/> Clinical chemistry            | <input type="checkbox"/> Toxicology                           |
| <input type="checkbox"/> Clinical microbiology         | <input type="checkbox"/> Transfusion medicine / Blood banking |
| <input type="checkbox"/> Cryobiology / Biopreservation | <input type="checkbox"/> Others (please specify):             |
| <input type="checkbox"/> Environmental chemistry       |   |
| <input type="checkbox"/> Environmental health sciences |   |

2. If you have consulted or corresponded with a research supervisor at the University of Alberta regarding admission to this department's Graduate Studies program, please provide their name(s).

3. On a separate page, provide a one page description summarizing your interest in the specific research areas selected above. Please incorporate a discussion on any relevant experience or your future research and learning objectives. You may include information or ideas gained from your discussions with potential supervisors.

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Date

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Signature