Purdue Military Research Initiative (PMRI) Application	
Name:	
	ry Service:
Email: Office Phone:	Cell Phone:
Previous Degree(s) and University(s):	
Year(s) degree(s) completed:	Cumulative GPA(s):
Please list Purdue Departments you have appl	lied to:
Did your military service select you for advar	nced civil schooling for a: \Box PhD \Box MS
Will you be returning to active duty after grad	luation? Yes No
Intended degree and major:	
Have you been accepted? \Box Yes \Box No	\Box Have not heard
• Have you made contact and selected a	prospective faculty member as an advisor?
\Box Yes \Box No Name(s):	
• What is the area of research that you'r	re expecting to pursue?
	te program affiliated with a Purdue Center or 7. If yes, Center Name:
 Is this research in the expected graduate program affiliated with a DoD grant or contract? Yes □No□Don't Know. If yes, DoD Grant Name: 	
	el annual report to the Purdue Graduate School on
the PMRI tuition scholarship progress	
	ings arranged by the PMRI to support program
success? □Yes □No	
This is my application and all information is accurate. I release PMRI faculty and staff to track my Purdue Graduate School application.	Signed:

Please return this form to: Dave Hankins, <u>dhankins@purdue.edu</u>, (765) 494-9816