

Application for Membership to Physics Hall of Fame

Name (Last Middle First)			Date	
Present Address (number, street, City, State, Country)				
Birth date	Date of death	Area of Expertise		
Age and Date at which most important work was done		Friends/ Relatives who are members		
Have you ever been convicted of a felony?	Three References			
	1	2	3	
Any Contagious or communicable diseases?	Educational Background (continue on separate sheet if necessary)			
	School	Location	Dates From-to	Degree
Grade School				
High School				
University/college				
Work History - Begin with most recent. (continue on separate sheet if necessary)				
Employer	Address		Salary	
Supervisor	Started	left	reason for leaving	
Employer	Address		Salary	
Supervisor	Started	left	reason for leaving	
Employer	Address		Salary	
Supervisor	Started	left	reason for leaving	

Hobbies

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...Continued

Clubs, Organizational Activities

Were you ever injured or hospitalized?
Explain.

Do you have any medical or health problems that would interfere with or detract from your ability to work?

Please Include a bibliography