

Join the List

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* Required

* This form will record your name, please fill your name.

1. Full Name *

2. Email Address *

3. Graduation Date (Month, Year) *

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4. What degree(s) are you pursuing? (e.g.; Bachelors, Electrical Engineering)

*

5. What opportunity are you most interested in at the USPTO? *

- ☐ Patent Examiner
- ☐ Internships/Externships
- ☐ N/A
- ☐ Other

6. How did you hear about this event?

7. Was this the first time you connected with the USPTO at an event?

- ☐ Yes
- ☐ No



8. How likely are you to apply for a position with the USPTO?

- ☐ Very likely
- ☐ Somewhat likely
- ☐ Neither likely nor unlikely
- ☐ Somewhat unlikely
- ☐ Very unlikely

9. Would you like to sign up for our emailing list to receive more information about career opportunities and future events? *

- ☐ Yes
- ☐ No

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