

WHAT DEGREE DO YOU PLAN TO PURSUE?

PhD MD MD/PhD Other (*specify* _____)

RESEARCH ADVISOR

Name _____

Signature _____

Advisor's Mailing Address:

College / University _____

Department _____

Street _____

City _____, *State* _____ *Zip* _____

REFERENCE (typically a former professor or research advisor)

Name _____

Reference's Mailing Address:

College / University _____

Department _____

Street _____

City _____, *State* _____ *Zip* _____

BRIEFLY DESCRIBE YOUR PRIOR RESEARCH EXPERIENCE AND LIST ANY ACADEMIC HONORS, AWARDS OR PRIZES YOU MAY HAVE RECEIVED SINCE ENTERING COLLEGE:

RESEARCH PROJECT TITLE:

BRIEFLY DESCRIBE THE PROJECT YOU PLAN TO CONDUCT UNDER THE GUIDANCE OF YOUR RESEARCH ADVISOR (do not exceed one single-spaced page):

CHECK LIST OF MATERIALS REQUIRED:

- Cover letter briefly describing your research interests and career goals
- Completed application form (signatures are required from the applicant and research advisor)
- Copy of your college transcript (official or unofficial) with complete list of coursework and grades

By my signature below, I certify that the information provided on this application is true and correct to the best of my knowledge.

Signature: _____ *Date:* _____

Please email your completed final application to:

SIPBR@coloradomesa.edu

your project advisor should also send the following documents to this address

- **A letter supporting your application**
- **A short (< 1 page) mentoring plan describing how the project advisor's mentorship will contribute to the development of the aspiring scientist**