UNDERGRADUATE RESEARCH & CREATIVE SCHOLARS PROGRAM APPLICATION

| Title of Proposal: | | |
|--|-----------------------|------------------------------|
| Name of Applicant Salutation (Mr. Ms. Mrs.) | | |
| W # | | |
| Major | | |
| College E-Mail address | | |
| Phone number | | |
| Total Credit Hours Completed: | | |
| Cumulative GPA: | | |
| Expected Graduation Date: | | |
| (Note: Students must have completed 30 hours of undecumulative GPA of 3.0 and have at least two semesters be accepted for research projects that have been large | remaining before g | raduation. Proposals will no |
| Applicant's Faculty Advisor | | |
| Faculty Advisor's Department | | |
| Faculty Advisor's email and phone number | | |
| Applicant's Department Head | | |
| Compliance Issues: Will your research involve any of th | ie following? Check v | where appropriate. |
| *Vertebrate Animals *Infectious Biohaza | ards *Human | Subjects |
| *IRB or IACUC approval may be required. You must obtadvance of starting your research project. | ain the appropriate | compliance approvals well in |
| ENDORSEMENTS: | | |
| X | | |
| Signature of Applicant | Date | |
| X | | _ |
| **Signature of Advisor | Date | |

^{**}By my signature, I am indicating that I have reviewed this research/creative proposal, discussed it with the applicant, and approved its contents. My signature indicates that I agree to serve as his or her Faculty Mentor.