



**SUMMER MENTORED RESEARCH PROGRAM
STUDENT APPLICATION FORM**

Deadline: February 20, 2009

Return completed applications to:

Caroline Miller Robinson
INBRE-Mentored Research Program
UAMS
4301 W Markham Street, # 818
Little Rock, AR 72205

Check one:

- Biomedical Summer Research Program
(Science majors, e.g. biology & chemistry)
- Bioinformatics Summer Research Program
(Math & computer science majors)

Application online at <http://brin.uams.edu/Mentored1.asp>

Name (print or type): _____ SSN: _____

Email Address: _____ Cell Phone #: _____

Date and Place of Birth: _____ U.S. Citizen? Yes No

Please Note: this section is **OPTIONAL** your response will be used for statistical purposes only.

Gender: Female Male

Please pick a category, which describes your ethnic/racial status:

- | | |
|--|--|
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Black, not of Hispanic Origin | <input type="checkbox"/> White, not of Hispanic Origin |

Mailing address: _____

Cell Phone: () _____

High School Attended: _____ HS Graduation date: _____

Colleges attended: _____ Major: _____

Expected Date of College Graduation: _____ Current Status (Please circle one) FR SO JR SR

Cumulative Grade Point Average: _____ Science/Math GPA: _____

Date GRE was/will be taken: _____ Date MCAT was/ will be taken: _____

Names, addresses, and phone numbers of two science/math professors you have asked for recommendations. Please ask them to send the recommendation letter to the above address.

_____	_____
_____	_____
_____	_____
_____	_____

