

Research Experience for Undergraduates Program Application
University of South Florida College of Engineering

1. Name: _____
Last First MI

2. Social Security Number: _____
(If none, put N/A)

3. Mailing Address: _____
Number and Street

_____ City State Zip

() _____
Phone

4. Home Address: _____
Number and Street

_____ City State Zip

() _____
Phone

5. Email Address: _____

6. Citizenship or Visa Status: _____

7. (Completion is voluntary) To help us determine the degree to which diverse segments of our population are served by this program, please answer the following questions. Participants will be selected on merit, regardless of race, religion, national origin, or gender.

Male _____ Female _____

African American _____ Asian _____ Caucasian _____ Hispanic _____

Multi-ethnic _____ Native American _____ Other _____

8. Department: _____ 9. Major: _____

10. Current college level?: Freshman ___ Sophomore ___ Junior ___ Senior ___

11. Names and telephone numbers of 2 of your professors:

Name: _____ Phone#: _____

Name: _____ Phone#: _____

12. Dates you are available for the program:

From _____ To _____

13. Please describe any scientific or related experience, including research positions, which you have had since graduation from high school:

14. Publications or honors: _____

Applicant Signature

Date

Submit this application to: REU Program
College of Engineering
ENB 131