





## UNDERGRADUATE RESEARCH PROGRAM APPLICATION

## (UGRP)

Upon completion of the first year of college, students may be eligible to enter the University's Undergraduate Research Program (UGRP). Here students participate in research activities over the summer term with faculty mentors in a variety of science and health fields including biology, chemistry, engineering, medicine, nursing, and sociology.

| Please complete a       | se complete all areas. Incomplete applications will not be considered. |          |             |                  |                 |
|-------------------------|--|----------|-------------|------------------|-----------------|
| Today's Date:           |  |          |             |                  |                 |
| PART I - APPLI          | CANT IN  | FORMATIO | N           |                  |                 |
| Name: (Last, First, MI) |  |          |             | Social           | Security Number |
| Date of Birth           | Age  | Gender:  | MaleFemale  | Race/Ethnicity _ |                 |
| SCHOOL (LOCAL)          | ADDRESS  |          |             |                  |                 |
| Street or P.O. Box #    |  |          | City        | State            | Zip Code        |
| PERMANENT ADD           | RESS   |          |             |                  |                 |
| Street or P.O. Box #    |  |          | City        | State            | Zip Code        |
| EMERGENCY COM           | NTACT INFO   | ORMATION |             |                  |                 |
| Name                    |  | R        | elationship | Phone            | e Number        |

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The views expressed in written materials or publications and by program coordinators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention by trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

USA Center for Healthy Communities, Center of Excellence Attn: Mary C. Williams – STARS Program 5795 USA Drive N. CSAB 104

Mobile, AL 36688-0001 Telephone: (251) 471-7709

Fax: (251) 471-7122

| nool currently attending:   | Cumulative GPA:                                      |
|---|--|
| ssification: Major:   |  |
|   |  |
| any honors or awards you have received:   |  |
| of organizations and extracurricular activities in  | which you are involved:                              |
|   |  |
| any job held or holding:  |  |
|   |  |
| III - PERSONAL STATEMENT: Please write  | e short statements/answers describing the following: |
| Varia gamanal ammanah ta masanah.   |  |
| Your general approach to research:  |  |
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| lease include the following with your complete  |  |
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| lease include the following with your complete  A copy of your resume  An official transcript |  |