APPLICATION FOR RESEARCH EXPERIENCE FOR UNDERGRADUATES IN PHYSICS

Application Window: October 1-15 annually

Name: _____________________________________  Student ID # ___________________  Department: _____________________

Campus/Local Address: ____________________________________________________________________________________

Phone: ______________  E-mail: ________________________  Undergraduate major __________________

Project Title: _____________________________________________________________________________________

Cumulative grade point average (cum gpa) ____________  UG Class Standing (circle): Sophomore, Junior, Senior

Amount Requested [maximum $1000]: ________

I agree that the funds will be used for the purposes of the described project. If my plans change, I will notify my faculty sponsor and the physics department chair.

Student’s Signature: ____________________________________

I have read the attached project description, endorse the project and agree that the budget is appropriate. I agree to be responsible for project oversight, purchase of supplies, and accounting of expenses. If plans change, I will notify the Department chair and return funding as appropriate.

Faculty Sponsor

Name: ____________________________________

Signature: ____________________________________

• Please attach a one-page description of the project (in your own words). Note that research involving human subjects requires Institutional Review Board (IRB) approval; please indicate if approval has been received or is in process.

• Please provide a one-page financial justification, listing all expenses.

• Materials should be submitted electronically to the Department of Physics

Email: physics+REU@uvm.edu