



The
UNIVERSITY
of VERMONT

Neuroscience COBRE

Departments of Anatomy & Neurobiology, Neurology and Pharmacology

Summer Undergraduate Neuroscience Research Fellowship Application

E-mail completed application and CV to Daniel.Mills@uvm.edu. Thank you!

BIOGRAPHICAL INFORMATION

Name:

Date of Birth:

E-mail Address:

Mailing Address:

Permanent Address:

Telephone Number:

Permanent Telephone Number:

The following **optional** information is used for statistical purposes. I identify myself being (*check all that apply*):

male

female

african american

native american

latino/ chicano american

asian american

mixed racial heritage american

international (born and raised outside US); Country: _____

disabled

"first generation" college student

economically underprivileged (grew up in a family whose income was below the federally established poverty level)

EDUCATION

Current GPA:

| Institution | Dates From/To | Major | Degree and Date Expected |
|-------------|---------------|-------|--------------------------|
|-------------|---------------|-------|--------------------------|

List any science-related coursework and grades obtained:

Briefly describe any relevant laboratory and research experiences:

List two references (names and email addresses). Please note that we will contact the references if need be; they do not need to send letters at this time.

Please provide a statement of interest as to why you would like to participate in this program and how it will help you advance your career.