SUMMER UNDERGRADUATE RESEARCH EXPERIENCE

May 29 –August 3, 2018
Application deadline: February 15, 2018
Stipend: $3,500 (10 week program)

For undergraduates interested in doctoral (Ph.D. degree) programs in biomedical sciences and a career as a scientist/researcher in biomedical sciences. The program will provide the opportunity to perform supervised research in the fields of molecular and cellular biology.

For additional information, please email us at gsbs-stratford@rowan.edu, call (856) 566-6282 or go to our website: rowan.edu/gsbs.

Rowan University Graduate School of Biomedical Sciences
Summer Undergraduate Research Experience
42 East Laurel Road, Suite 2200
PO Box 1011
Stratford, New Jersey 08084
The Summer Undergraduate Research Experience (SURE) is designed to provide a stimulating hands-on research experience for undergraduate students considering graduate education in the biomedical sciences. The program is conducted at Rowan University Graduate School of Biomedical Sciences in Stratford, New Jersey.

**PROGRAM DESCRIPTION**

Each student will have the opportunity to learn the basic skills necessary to contribute to the research effort while working with and under the guidance of a selected member of the graduate faculty. The program runs for a ten-week period from May 29 through August 3, 2018. Research opportunities for students are available in many areas of biomedical research including developmental biology, inflammatory mediators, aging, gene expression, stem cells, and cancer biology. Techniques a student might learn include: tissue culture, electrophoresis, chromatography, animal surgery, immunochemistry, fluorescence imaging, molecular genetics and recombinant DNA technology. Students will attend various scientific seminars and present their results at the close of the program. They will also be invited to participate in our annual Fall Research Retreat.

**ELIGIBLE STUDENTS**

The program is open to undergraduate students who are considering a research career in the biomedical sciences. Selection of students will be based on the completed application, transcript, and two letters of recommendation. Deadline for receipt of materials is February 15, 2018.

**FUNDING**

Students will receive a $3,500 stipend to be disbursed in one lump sum. Students must pay for their own housing and travel expenses to and from Stratford.
SUMMER UNDERGRADUATE RESEARCH EXPERIENCE

The Summer Undergraduate Research Experience (SURE) is a program designed for undergraduate students interested in doctoral (Ph.D.) bioscience programs and a career as a scientist/researcher in the Biomedical Sciences. The program provides a full-time research experience in which students work with a faculty member of the Graduate School in a modern research laboratory. Students accepted into the program will have hands-on experience in one of several exciting areas of current biomedical research.

To be considered for the program, you must provide the following:

1. **Application** and all supporting documents by February 15, 2018.
2. **Official Transcript** from all colleges attended/attending.
3. **Statement** as to why you wish to participate in this program and your career goals.
4. **Recommendation Letters (2)** from your Science faculty members. If you have research experience, one letter should be from your mentor.

There is no tuition cost for the program, and students who qualify will receive a fellowship of $3,500 for the ten-week period (May 29 to August 3, 2018). Interested students should fill out the application forms and return by **February 15, 2018** to:

Rowan University  
Graduate School of Biomedical Sciences  
Summer Undergraduate Research Experience  
University Doctors Pavilion, Suite 2200  
42 East Laurel Road  
PO Box 1011  
Stratford, New Jersey 08084

If you have any questions concerning this program, please contact the Graduate School of Biomedical Sciences, (856) 566-6282 or by E-mail at gsbs-stratford@rowan.edu. Please visit our website at www.rowan.edu/gsbs.
SU MMER UNDERGRADUATE RESEARCH EXPERIENCE

APPLICATION FOR ADMISSION

1. Name __________________________________________________________ Date of Birth ____________________________
   (Last) (First) (Middle)

2. College/University ____________________________________________

   Mailing Address
   (Number and Street) (City, State, Zip)

   Present Classification □ Freshman □ Sophomore □ Junior

3. If your education has been interrupted, list in detail your activities during intervening period (use separate page)

4. What is your undergraduate major and approximate GPA?

   Major __________________ Overall GPA _______ Science GPA _______

5. Which of the following exams have you taken?
   □ GRE □ MCAT □ DAT □ Other __________

6. Year and month you expect to enroll in a post-graduate school ____________________________

7. What type of post-graduate education do you plan to pursue?
   □ Ph.D. □ DO/MD □ DDS □ DVM □ Other ______________________

8. What research areas are you interested in? ____________________________

9. Email address (personal) __________________________ Email address (college) __________________________

10. Current mailing address __________________________________________ Telephone (___)__________
County if NJ __________________________

(City, State, Zip)

11. Permanent legal address (if different from above) ___________________________ Telephone (___) __________________

(City, State, Zip)

12. Cell phone number __________________________

13. Social Security Number __________ - _________ - ___________   Sex: □ Male □ Female

14. Responses to Gender, Birth Date, Ethnicity and Race are voluntary and will be kept confidential. Failure to furnish this information will not adversely affect the status of this application.

Date of Birth (Month/Day/Year): ___________________________ Gender: □ Male □ Female

Part I – Ethnicity: Select one: □ Hispanic or Latino □ Not Hispanic or Latino

Part II – Race: Select one or more:

□ American Indian or Alaskan Native □ Asian □ Black or African American
□ Native Hawaiian or other Pacific Islander □ White

15. Do you require assistance in identifying suitable housing during the summer? _______________________________

16. Name and telephone number of person to notify in case of emergency ________________________________

Signature __________________________________________________ Date _______________________________

Briefly describe your biomedical career goals; include an explanation of how your participation in this program will further these goals. You should also include a description of any previous research experience that you may have.