



**2015 Summer Internship Application**

Name \_\_\_\_\_

College/University \_\_\_\_\_

Major \_\_\_\_\_

Current Grade Level

☐ Sophomore ☐ Junior ☐ Senior

Date of Graduation

☐ Spring 2016 ☐ Spring 2017 ☐ Other \_\_\_\_\_

Are you a MARC student? ☐ Yes ☐ No

Date of Birth \_\_\_\_\_

Gender: ☐ Male ☐ Female

Citizenship: ☐ United States ☐ Other \_\_\_\_\_

Permanent Resident of the U.S.? ☐ Yes ☐ No

Resident of Missouri?

☐ Yes (eligible for in-state tuition) ☐ No

Racial/Ethnic Background(optional) \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Permanent Address/Zip Code/Phone

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please consider my application for the following program(s) that I am eligible for. (All programs require that students be either U.S. Citizens or Permanent Residents, and are currently enrolled in undergraduate study.)

☐ **Summer Research Internship in Cell & Molecular Biology**  
(preference given to students interested in finding more about MU's PhD programs in Life Sciences)

☐ **Biochemistry** (preference given to students interested in finding more about MU's PhD program in Biochemistry)

Please carefully review the faculty listings at departmental web sites (see information booklet). List below 8 MU faculty members (in order of preference) whose research is of interest to you. Please check the application information to ensure that the faculty you list are participating in the program(s) you are applying for.

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

7 \_\_\_\_\_

8 \_\_\_\_\_

Courses: Fall Semester 2014

Winter/Spring (current) Semester

Dept.	Title	Credits	Grade	Dept.	Title	Credits

Overall GPA: \_\_\_\_\_ on a \_\_\_\_\_ scale.

Previous Research Experience \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Educational and Career Plans after Graduation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Plans for advanced degree(s): ☐ MA/MS ☐ PhD ☐ MD ☐ MD/PhD ☐ Unknown ☐ Other \_\_\_\_\_

Brief Summary of your Research Interests for this summer and beyond \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other comments: \_\_\_\_\_  
\_\_\_\_\_

How did you learn about our summer program? \_\_\_\_\_

Please include an unofficial transcript, personal statement, resume, and at least one letter of recommendation from a science faculty member (someone who has taught you or with whom you have worked). Two letters of recommendation are preferred. A resume is very helpful. If you handwrite your application, please PRINT CLEARLY.

Please return your application to Pam Cooper, Office of Undergraduate Research, 150 Bond Life Sciences Center, University of Missouri, Columbia, MO 65211. (Fax: 573-884-9395 or email: CooperPJ@missouri.edu) The deadline is Friday, February 13, 2015.