

**Summer Undergraduate Research Fellowship (SURF) 2024**

**Student Application Form**

Please complete this form and return it with your personal statements, unofficial copy of your transcript(s), and one letter of recommendation to the Undergraduate Office email address at [ugrad@chem.ucla.edu](mailto:ugrad@chem.ucla.edu).

**All application materials must be received no later than Wednesday, February 28, 2024**

**1. General Information (please type or print neatly in black ink)**

Full Name: \_\_\_\_\_  
*Last First M.I.*

UCLA ID #: \_\_\_\_\_ Last 4 digits of SSN #: \_\_\_\_\_ Date of Birth (MM-DD-YYYY): \_\_\_\_\_

To which gender to do you most identify:

- Female  Transgender Female  
 Male  Transgender Male  
 Gender Variant/Non-Conforming  Prefer Not to Answer

Are you a citizen of the United States?  YES  NO If NO, Permanent Resident ID # \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Year In School:  First  Second  Third  Fourth  Fifth

Undergraduate Major: \_\_\_\_\_

Expected Degree Completion Date (term/year): \_\_\_\_\_

Future Plans?  Teaching Credential  M.D.  Masters  M.D./Ph.D.  Ph.D.

Other (specify): \_\_\_\_\_

Proposed Graduate Field of Study (if applicable): \_\_\_\_\_

What schools do you plan to apply to? \_\_\_\_\_

Proposed Start Date for Graduate/Professional School (term/year): \_\_\_\_\_

## 2. Research Information

Faculty Mentor(s) Name: \_\_\_\_\_ Department: \_\_\_\_\_

Address & Mail Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Will you be receiving any other funding for this research project? YES  NO

If yes, what will be the funding source? \_\_\_\_\_

## 3. Short Answer Questions

List employment/work-study positions during the past three years (*indicate dates and duration*).

List honors, awards, prizes during the past three years (*indicate dates and duration*).

List extracurricular and community activities during the past three years (*indicate dates and duration*).

List prior research activities (*indicate dates, name of program, institution and duration*).

List scientific papers and abstracts you have co-authored (*complete citation: authors, year, title, journal, vol., pages*).

#### 4. Personal Statements

Please respond on separate sheets of paper. Number each essay response to the corresponding number for each question.

- (1) Briefly (<500 words) describe your previous research experience including the aim of the project(s) and your specific role and contributions to it. [Applicants with limited research experience can describe a work experience, which has contributed significantly to their career objectives.]
- (2) Briefly (<250 words) describe your academic and career goals and how participation in this program will contribute to these goals.
- (3) Describe in no more than 500 words your proposed research project and indicate whether or not this topic is a continuation of a prior research project.

#### 5. Transcript(s)

Submit an unofficial UCLA transcript with your application along with unofficial transcripts from any other University or Community College that you attended.

#### 6. Recommender

Submit one letter of recommendation (see attached form) from a faculty member who can best assess your ability for scientific research.

Name of Recommender: \_\_\_\_\_

Department: \_\_\_\_\_

Position: \_\_\_\_\_

#### CHECKLIST:

- Complete Student Application Form
- Personal Statements
- Unofficial Transcript(s)
- One Letter of Recommendation
- Email all materials to [ugrad@chem.ucla.edu](mailto:ugrad@chem.ucla.edu)**

***I understand that enrollment in a summer session class or any other outside commitment (including a job) may result in adjustment to the terms of the award.***

**Initials:** \_\_\_\_\_

***I hereby certify that to the best of my knowledge all information submitted is complete and correct. I also hereby certify that I have read the material regarding the Chemistry and Biochemistry Undergraduate Summer Research Program and agree to abide by it if selected. I understand that failure to disclose accurate information is grounds for immediate termination from this program.***

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_