## SURE 2024 Program Summer Undergraduate Research Experiences Application Form

Complete this application form, printing legibly, and return the form to Mitzi Nichols in the Chemistry and Physics Department Office (Science 035) by **noon, Friday, February 16, 2024**.

Name:											
Address:	Street	address	S								
Address:	City				State			Zip			
Email:											
Telephone:											
Student ID:						Majo	Major:				
Class (circle on	e):	Fr	So	Jr	Sr			GPA:			
If eligible, do yo	u want	to use y	your exp	perience	grant fo	SURE?		Yes	No	N/A	
[Students wh	o enrolle	ed at ISU	in Fall 20	22 or late	r are eligib	le for one exp	perience	grant, val	ued at \$3500	for SURE.]	
Do you plan to take classes this summer?						Yes, full-f	es, full-time Yes, half-ti			No	
Do you plan to work outside SURE this summer?					er?	Yes, full-t	Yes, full-time		nalf-time	No	
[See the SUR	E Guide	lines for	guidance	on partic	ipating in	SURE and tak	ing clas	sses or wo	rking at the s	ame time.]	
Please identify speak with pote as many as three	ntial m	entors r									
Preference	Research Mentor						Scho	cholarship Preference (circle one)*			
First:							full-t	ime only	/ half-time o	only / either	
Second:						<del> </del>	full-time only / half-time only / either				
Third:							full-time only / half-time only / either				
*Some research i	mentors	may offe	er projec	ts that ar	e offered o	only full-time	or half-	time only.	Check with	the mentor.	

You will be notified of the results of the selection process by March 8, 2024.