AANAPISI & LSAMP Spring Semester Research Experience

Research Agreement Form

Along with your mentor, please complete the information below and return it to Terri Bernstein, Assistant Director for Undergraduate Research, located in SSC-A 301

Student’s Name: ________________________________

Student Signature: ____________________________ Date: __________

Faculty Mentor’s Name: __________________________

Mentor Signature: ______________________________ Date: __________

The following questions are designed to enhance communication about expectations between students and faculty mentors and provide information for program data collection purposes.

1. What research skills will the student gain or improve upon completion of spring research?

2. What research tasks/activities will the student be exposed to during the spring?

3. What is the average amount of hours per-week expected for students to be engaged with spring research?

AANAPISI