

# AANAPISI & LSAMP Spring Semester Research Experience

## Research Agreement Form

*Along with your mentor, please complete the information below and return it to Matthew Della Sala, 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?

