English ▼

SURVEY INSTRUCTION

Coordinated by the MU Office of Undergraduate Research, the Summer Undergraduate Research Program hosts students from institutions across the nation. Interns in the program participate in educational and social activities creating a vibrant, inclusive, and welcoming summer community. Under the guidance of an MU faculty mentor, students work on their own projects in collaboration with graduate students, lab technicians, and post-doctoral researchers.

Applicants must have completed at least one year of full-time college enrollment prior to June 2024, and pursuing a major in a field related to the program to which they are applying, to be eligible for participation. In addition, students must be citizens or permanent residents of the United States.

The MU Summer Undergraduate Research Program is committed to providing an inclusive opportunity to all students. We encourage all students, including those with disabilities, to apply. Students requiring accommodations to participate in our program should contact Heather Tearney - 573-882-5979 - tearneyk@missouri.edu so we can engage in the process of determining and securing accommodations.

Applicant Information

Applicant Name:

First Name

Last Name

Date of Birth (MM/DD/YYYY)

Gender Identity (Optional)

○ Male/Man

○ Female/Woman

○ Nonbinary/Third Gender

○ Genderqueer/Gender Nonconforming

○ Prefer to Self-Describe

○ I decline to answer

Preferred Pronouns (Optional)

○ He/Him/His

○ She/Her/Hers

○ They/Them/Theirs

○ Prefer to Self-Describe

○ I decline to answer

Do you have any disabilities that you would like to self disclose? (Optional)

○ Yes

○ No

If yes, please elaborate

[   ]

What is your citizenship?

☐ U.S. Citizenship

☐ Other: [   ]

Are you a permanent resident of the United States?

○ Yes

○ No

Home Mailing Address:

Street Address: [   ]

City: [   ]

State: [   ]

Zipcode: [   ]

Are you a resident of Missouri?

○ Yes

○ No

Please enter your email address.

[   ]

Please confirm your email address.

Telephone Number:

Cell Phone:

Home Phone:

Academic Information

What is your Current College/University:

Academic Major/Minor:

Enter "N/A" or "None" if you are not pursuing a minor.

Major:

Minor:

What is the last day of your Spring Finals Week?

Current Grade Level:

Spring 2024 Courses

Please provide the list of courses in which you are enrolled for Spring 2024.

Course #1

Course #2

Course #3

Course #4

Course #5

Course #6

Overall GPA - include scale please, (f*or instance if you have a 3.8 on a 4.0 scale, or a 4.7 on a 5.0 scale.)*

Expected Graduation Date

○ Winter 2024

○ Spring 2025

○ Winter 2025

○ Spring 2024

○ Spring 2026

○ Other: _____

Are you an NIH MARC or RISE student?

○ Yes

○ No

Plans for an advanced degree? (Select all that apply.)

☐ MA/MS

☐ PhD

☐ MD

☐ MD/PhD

☐ Unknown

☐ Other _____

What are your educational and career plans after graduation?

Research Experience

Do you have previous research experience?

⚪ Yes

⚪ No

Please tell us about your previous research experience.

Please provide us a brief summary of your research interests for this summer and beyond.

Summer Program Application

Please carefully review the faculty listings for the program to which you are applying and their research interests via MU's departmental websites. Participating Faculty can be found at this [link](#)

List up to eight (8) faculty members, in order of preference, whose research is of interest to you.

1. [   ]
2. [   ]
3. [   ]
4. [   ]
5. [   ]
6. [   ]
7. [   ]
8. [   ]

Please upload a copy of your **unofficial transcript**. *Please name the file using your LastNameFirstName - Transcript*

Please upload a copy of your **personal statement**. *Please name the file using your LastNameFirstName - PState (*Word doc or PDF.*)*

Please upload a copy of your **resumé**. *Please name the file using your LastNameFirstName - Resumé* (*Word doc or PDF*.)

Letters of recommendation, one required (two preferred), should be e-mailed directly to the MU Office of Undergraduate Research by Friday, February 16, 2024.
You will receive a confirmation email of your application and responses, included will also be the email address to which the letters of recommendation should be sent - ugr@missouri.edu

○ I acknowledge that I have to contact my mentors and have them email the recommendation letter to ugr@missouri.edu

Confirm: To what email address will your mentors send their recommendation letter? (By Friday, Feb 16th)

[   ]

Application Closing

Do you have any other comments or information which you wish to share with us?

[   ]

How did you learn about our summer program?

☐ University of Missouri's Office of Undergraduate Research website

☐ Conference (please tell which one) [   ]

☐ Home University office of undergraduate research

☐ Other [   ]

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