

Application to the LU-PRISM Summer Program

I. PERSONAL INFORMATION

1. Name: _____	2. Longwood ID #: L _____
Last First M.I.	
3. School Address: _____	
Number and Street (or PO Box) City State or Country Zip Code	
4. Permanent Address: _____	
(if different from above) Number and Street (or PO Box) City State or Country Zip Code	
5. E-mail address _____	6. Phone: (____) _____
	Area Code schoolphone
	7. Phone: (____) _____
	Area Code home phone
8. Ethnicity (optional): <input type="checkbox"/> Black non-Hispanic <input type="checkbox"/> Amer. Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander	
<input type="checkbox"/> Hispanic <input type="checkbox"/> White non-Hispanic <input type="checkbox"/> Other _____	
9. Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent resident <input type="checkbox"/> Non-U.S. Citizen, Country: _____	
10. Date of Birth: _____	

II. EDUCATIONAL BACKGROUND

11. List below all colleges or universities you have attended, the dates of attendance (month and years), the major, degree (B.S. etc.) and the date (or expected date) of graduation.

Name of School and Location	Dates attended	Major	Degree	Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

12. During the 2018-2019 academic year, indicate your class level: Senior Junior Sophomore Freshman

13. Enter your current grade point average (GPA) and attach an **unofficial transcript** to this application.
 Cumulative GPA _____ Major GPA _____

III. INTERESTS AND CAREER AIMS

14. Research projects are available in a number of disciplines. From the list of project descriptions provided with this application, please list the **titles** of the three projects that you would **most** like to investigate this summer (in priority order).

A) _____

B) _____

C) _____

15. Indicate your career plans after graduation:
 Graduate school Medical school Employment Other _____

16. On a **separate page**, please provide a brief summary of your career goals and describe how your education and training has prepared you for these goals. Describe how participation in this program will help you attain your career goals (limit to one page, single spaced).

IV. ADDITIONAL INFORMATION

18. If chosen to participate in this program, do you anticipate needing on-campus housing? Yes No

19. If chosen to participate in this program, you are **REQUIRED** to enroll in a 1-credit research course during the **SPRING 2019** semester. Please check this box indicating that you are aware of this requirement. I understand this requirement.

Please save your application form, statement of career goals, and unofficial transcripts together in a single PDF document with the following file name (YOURLASTNAME.pdf) and send it electronically (as an attachment) to Dr. Sarah Porter (portersg@longwood.edu). If you have questions or concerns, please email Dr. Porter.