## Steve Kale Undergraduate Fellowship Program

## **Cover Sheet**

| Applicant name:  |             |           |                  |             |  |
|--|-------------|-----------|------------------|-------------|--|
| Program: BA / BS / Minor   |             |           | Year in Program: |             |  |
| Time period for project:   | summe       | r 2023 1  | fall 2023        | spring 2024 |  |
| Project Title:   |             |           |                  |             |  |
| One sentence overview of the proposed research:  |             |           |                  |             |  |
| Research mentor:   |             |           |                  |             |  |
| Signature of research mer  | ntor:       |           |                  |             |  |
| APPLICATION CHECKLIST:   |             |           |                  |             |  |
| [ ] This completed cover sheet, with on the following pages, in the same document:                       |             |           |                  |             |  |
| [ ] Description of the proposed research (see below)   |             |           |                  |             |  |
| [ ] Description of your interests and qualifications (see below)   |             |           |                  |             |  |
| [ ] I understand that if I do not complete a research project, I will be required to return the stipend. |             |           |                  |             |  |
| 500-word description of the proposed research:   |             |           |                  |             |  |
|  |             |           |                  |             |  |
| 500-word description of your interests and qualifications for the project:                               |             |           |                  |             |  |
|  |             |           |                  |             |  |
|  |             |           |                  |             |  |
| Timeline of proposed activities  |             |           |                  |             |  |
| Research activity Week   | 1-3 Weeks 4 | 4-6 Weeks | 7                | Week 7-10   |  |
|  |             |           |                  |             |  |
|  |             |           |                  |             |  |
|  |             |           |                  |             |  |
| Does your proposed research include any of the following? If yes to any, please attach IRB approval.     |             |           |                  |             |  |
| Yes / No Human Subjects  |             |           |                  |             |  |
| es / No Radioactive Materials  |             |           |                  |             |  |

Yes / No

Yes / No

Live Vertebrates

Biohazards