

APPLICATION FORM  
(due by February 1, 2010)  
**BIOCHEMISTRY SUMMER UNDERGRADUATE  
RESEARCH FELLOWSHIP (BSURF) - 2010**

Department of Biochemistry  
The University of Iowa  
College of Medicine  
51 Newton Road 4-403 BSB  
Iowa City IA 52242  
[www.biochem.uiowa.edu](http://www.biochem.uiowa.edu)

Name \_\_\_\_\_  
First \_\_\_\_\_ Mid. Int. \_\_\_\_\_ Last \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Citizenship:  U.S. Citizen  Permanent Resident  Non-resident Alien

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone No. \_\_\_\_\_

College or University Attending: \_\_\_\_\_

Your Address at College or University: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone No: \_\_\_\_\_

E-mail \_\_\_\_\_

What is your college major? \_\_\_\_\_

Currently I am a:  Freshman  Sophomore  Junior  Senior

Your expected date of graduation: Mo: \_\_\_\_\_ Yr: \_\_\_\_\_

Current GPA \_\_\_\_\_ Academic Advisor: \_\_\_\_\_

After what date should we contact you at your permanent residence rather than at  
school? \_\_\_\_\_

Have you had any previous experience in laboratory research?  Yes  No  
If "yes", briefly describe below the nature of the research.

Discuss briefly your educational and/or career plans after you obtain your bachelor's degree.

Indicate your first, second and third choices below of the selected research projects. You can find the faculty names and research interest at: [www.biochem.uiowa.edu/faculty.html](http://www.biochem.uiowa.edu/faculty.html). This will help us match your interests with an appropriate mentor.

First lab choice: \_\_\_\_\_

Second lab choice: \_\_\_\_\_

Third lab choice: \_\_\_\_\_

An **official transcript and two letters of recommendation** should be sent to the address at the bottom of this application. In the space below, give the name, address, telephone number and e-mail address of each of the two individuals (preferably science professors) you have asked for a letter of recommendation. The letters may be sent directly to Dr. Washington.

1.

2.

Below, or on a separate sheet, add any information that may help us evaluate your application.

**Return the completed application to the address below by February 1, 2010**

Dr. M. Todd Washington  
Department of Biochemistry  
51 Newton Road Rm 4-711 BSB  
University of Iowa  
Iowa City IA 52242-1109