

Friends of the Semel Institute Research Scholar Program 2019-2021 Application
Please type or print neatly. All information requested in this application is required.

Name (Last, First, MI): _____

Preferred mailing address

Street Address: _____

City, State, Zip: _____

Email Address: _____

Phone: _____ Fax: _____

Name of Department and Laboratory/Center: _____

Position at Semel Institute: _____ UCLA ID #: _____

General area of research: _____

How did you hear about the program? _____

Application Checklist:

- | | |
|--|--|
| <input type="checkbox"/> Complete application form | <input type="checkbox"/> Timeline of Completion |
| <input type="checkbox"/> Budget and Budget justification | <input type="checkbox"/> Synopsis (1 pg.)/ Detailed protocol |
| <input type="checkbox"/> Documentation of IRB/ARC submission | <input type="checkbox"/> One-paragraph lay-language abstract |
| <input type="checkbox"/> Curriculum Vitae | |

Original plus nine (9) copies are required at the time of submission

Deadline: September 15, 2019 12:00 PM PDT