

**APPLICATION**  
**University of California, Santa Cruz**  
**Summer Undergraduate Research Fellowship**  
**SURF**  
**June 22 - August 28, 2009**

\_\_\_\_\_  
Name (First, Last)

\_\_\_\_\_  
Email Address (please print clearly)

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

\_\_\_\_\_  
Address while at school

\_\_\_\_\_  
Permanent Telephone Number

\_\_\_\_\_  
Telephone Number while at school

Are you a U.S. Citizen? \_\_\_\_\_ If not, are you a permanent resident? \_\_\_\_\_

[Applicants must be citizens or permanent residents of the United States to be eligible for the program](#)

Check the box of the ethnic group you most strongly identify with:

<input type="checkbox"/> African/African American/Black	<input type="checkbox"/> Japanese/Japanese American	<input type="checkbox"/> Pacific Islander
<input type="checkbox"/> Mexican/Mexican American/Chicano	<input type="checkbox"/> Chinese/Chinese American	<input type="checkbox"/> White/Caucasian
<input type="checkbox"/> Korean, Korean American	<input type="checkbox"/> Vietnamese/Vietnamese American	<input type="checkbox"/> Decline to specify
<input type="checkbox"/> Other Spanish/Latino	<input type="checkbox"/> Other Asian	
<input type="checkbox"/> East Indian/Pakistani	<input type="checkbox"/> Filipino/Filipino American	
<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Other _____	

Check the box of Post baccalaureate plans:    MS    PhD    PhD/MD    MD

Present College or University and Dates Attended: \_\_\_\_\_

Past College or University and Dates Attended: \_\_\_\_\_

Major: \_\_\_\_\_ Minor(s): \_\_\_\_\_

Expected Date of Graduation (Month/Year): \_\_\_\_\_

Highest degree obtainable at your home institution: \_\_\_\_\_

Honors or Awards: \_\_\_\_\_

\_\_\_\_\_

Chemistry and General Science Courses Completed (include computer science courses).  
Request official transcripts to be sent. If not graded, please provide narrative evaluations.

<u>Course</u>	<u>Grade</u>	<u>Course</u>	<u>Grade</u>
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Previous Scientific Employment, Lab Experience, and/or Research Experience:

Other skills or interests that are background to your SURF study:

Area of SURF research interest (Rank in order of preference - first, second, third, fourth):

BIOCHEMICAL  INORGANIC  ORGANIC  PHYSICAL

Specific projects of interest at UC Santa Cruz. Indicate 3 preferred advisors in order of preference:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Reason for interest in SURF Program (be sure to indicate how you will benefit from SURF study, and how SURF study fits into your career goals). Take as much space as you need to answer this question.

I would be interested in residing in an on-campus dorm with other SURF students during the summer:

Yes \_\_\_\_\_ No \_\_\_\_\_

I would prefer same gender accommodations

References: Request a letter of support from two individuals who are familiar with your science background. Please use the attached forms. Indicate the names and addresses of your references below. Have your references mail their documentation directly to the address indicated on their reference sheet.

**Name**

**Institution**

**Title**

1. \_\_\_\_\_

2. \_\_\_\_\_

Please return all forms to:

Lesley-Reid Harrison  
SURF Program, Dept. of Chemistry & Biochemistry  
UC Santa Cruz  
1156 High Street  
Santa Cruz, CA 95064  
Fax: (831) 459-2935  
Tel: (831) 459-4823  
Send Email to: [lesleyrh@ucsc.edu](mailto:lesleyrh@ucsc.edu)

**APPLICATION DEADLINE: Monday, January 19, 2009**

Fellowship for the ten weeks is \$3,750.00 plus on-campus housing.

## Letter of Recommendation

### Summer Undergraduate Research Fellowship

University of California, Santa Cruz

June 22 - August 28, 2009

Please provide an assessment of \_\_\_\_\_ who is an applicant for an UCSC NSF Summer Undergraduate Research Fellowship. Indicate his/her scientific talents and overall abilities. Is this student highly motivated towards science and research and can s/he work independently? Mention to what extent this student's transcript is an accurate reflection of his/her actual abilities.

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(use additional sheets if space is not sufficient)

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Institution

\_\_\_\_\_  
Mailing Address

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

**Please mail directly or email to:**

Lesley-Reid Harrison, SURF Program, Dept. of Chemistry and Biochemistry, UC Santa Cruz, 1156 High Street, Santa Cruz, CA 95064 **Tel:** (831) 459-4823, **Fax:** (831) 459-2935 **Email:** lesleyrh@ucsc.edu

**Letter of Recommendation**

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(use additional sheets if space is not sufficient)

_____ Your Name	_____ Title
_____ Signature	_____ Institution
_____ Mailing Address	_____
_____	_____ E-mail Address

**Please mail directly or email to:**

Lesley-Reid Harrison, SURF Program, Dept. of Chemistry and Biochemistry, UC Santa Cruz,  
1156 High Street, Santa Cruz, CA 95064 **Tel:** (831) 459-4823, **Fax:** (831) 459-2935, **Email:** lesleyrh@ucsc.edu