Lyle SURF Application Form
Summer Undergraduate Fellowship Program

Student Information:

1. Full Name _________________________________________

2. Student ID _________________________________________

3. University email _______________________________________

4. Do you have relatives employed at SMU or on the Board of Trustees?
   Yes __________ No __________
   a. If yes, list their name(s) and relationship to you.
      __________________________________________________

5. What is/are your major(s) and minor(s)?
   ___________________________________________________
   ___________________________________________________

Optional Student Information: (You may leave these blank if you do not wish to answer)

6. Gender ___________________________________________

7. Ethnic background (please check all that apply)
   African American or Black ______
   American Indian or Alaska Native ______
   Asian ______
   Caucasian ______
   Hispanic/Latinx ______
   Native Hawaiian/Other Pacific Islander ______
   Other ____________________________________________

Work Information:

8. Are you 18 years of age, or older? Yes __________ No __________
   a. If no, indicate what your age will be on the first day of the fellowship program: ___________

9. Are you eligible to work in the United States? (Students with an F1 Visa are eligible to work in the US)
   Yes __________ No __________
10. If selected for the program, you will be required to participate in the entire 8-week period: June 7, 2021 to July 30, 2021. Will you be available for the entire 8 week period?
Yes _________  No __________

Research Goals and Experience:

11. Do you intend to pursue a graduate degree?  Yes _____  No _____  Unsure ______
   a. If you have decided to attend graduate school, how do you anticipate a graduate degree helping you achieve your professional goals?
      _______________________________________________________________________
      _______________________________________________________________________
      _______________________________________________________________________

12. Have you conducted research under the guidance of a faculty member in the past?
   Yes _____   No, this will be my first experience _____

Essay Portion:

The following essay portion is used in the evaluation of your application.

13. Please prepare a Statement of Purpose which clearly explains your interest in the research opportunity AND your participation in the program activities as both pertain to your personal and professional goals (250 – 400 words).

14. In order to apply to the program, you are required to have already connected with a faculty mentor and agreed upon a research project. If you have not done this, please contact Dr. Bruce Gnade at bgnade@smu.edu. He will be able to assist you in finding a faculty mentor for a suitable research project. If you have already found your faculty mentor, please include their information below:
   a. Faculty Member Name: _________________________________________
   b. Faculty Member email: _________________________________________
   c. Research project title: _________________________________________
   d. Briefly describe your understanding of your role in the project.
      _______________________________________________________________________
      _______________________________________________________________________
      _______________________________________________________________________
      _______________________________________________________________________
Upload the following documents in either Word (.doc or .docx) or PDF format:

15. Resume
16. 2 Letters of Recommendations (including 1 letter from the faculty member directing the research). These can also be emailed directly to Bruce Gnade at bgnade@smu.edu