

Summer Undergraduate Research Experience Application (SURE)

Start of Block: Default Question Block

Q2 Deadline for submitting applications is February 22, 2022 (midnight)

Thank you for your interest in applying for the **2022 Summer Undergraduate Research Experience (S.U.R.E.)**. Please complete this form and upload the additional documents required to formally submit your application to the S.U.R.E. program. You may save your responses and return to complete at a later time. **Submit this application only if you have secured a faculty mentor and they have communicated to you that they will provide mentorship for the summer program.** If you need assistance with finding a mentor, contact Ann Gosky at agosky@kent.edu

Q3 Applicant's Name

☐ First (1) _____

☐ Last (2) _____



Q6 Banner ID Number



Q7 KSU E-mail

Q4 Applicant's Local Address

☐ Street Address (1) _____

☐ City (2) _____

☐ State (3) _____

☐ Postal code (4) _____



Q5 Phone Number

Q8 Gender:

☐ Male (1)

☐ Female (2)

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Q9 Enrollment Status (based on credit hours completed at the end of Fall 2021)

- ☐ Freshman (1)
 - ☐ Sophomore (2)
 - ☐ Junior (3)
 - ☐ Senior (4)
-

Q10 Hours completed as of the end of the Fall 2021 semester

Q11 Current campus at which you are taking the majority of your classes

- ☐ Ashtabula (1)
 - ☐ Columbiana County/Salem East Liverpool (2)
 - ☐ Geauga (3)
 - ☐ Kent (4)
 - ☐ Stark (5)
 - ☐ Trumbull (6)
 - ☐ Tuscarawas (7)
-

Q12 Major

Q32 Second Major (if applicable)

Q13 Minor (if applicable)



Q14 Cumulative G.P.A.



Q15 Major G. P. A.

Q16 Anticipated semester and year of graduation

Q33 Are you seeking a full-time (40 hours/week) SURE experience or a part-time (20 hours/week)?

☐ 40 hours per week (1)

☐ 20 hours per week (2)

Q17 Will you be registering as a part-time or full-time student in the Fall of 2022?

☐ Yes (1)

☐ No (2)

Q18 Do you plan to apply to a graduate degree program?

☐ Yes (1)

☐ No (2)

☐ Considering (3)

Display This Question:

If Do you plan to apply to a graduate degree program? = Yes

Or Do you plan to apply to a graduate degree program? = Considering

Q19 What graduate program would you like to pursue?

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Q20 Previous research experience: (program name, institution, year, faculty mentor, nature of research)

Q21 Academic and extracurricular awards, honors, and scholarships:

Q22 Memberships and participation in academic/campus organizations and activities:

Q23 What skills would you bring to a research activity?

Q24 What are your goals after graduation?

Q31 Provide a 250 – 400 word essay explaining your interest in the Summer Undergraduate Research Experience (S.U.R.E.). Explain your academic and career goals and why you want to participate in this program. Include any qualifications that you may have, such as employment, internships, research, laboratory experience or other skills. Please include details about your summer research plan (how will you be engaged). Please make sure your full name and banner id are noted on any uploaded file.

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Q25 What faculty member will be mentoring you for the Summer? To submit a complete application, a faculty member must be identified and provide a letter of support on your behalf. The faculty member will be contacted at the e-mail address you provide with instructions on how to submit this letter.

- ☐ First name (1) _____
- ☐ Last name (2) _____
- ☐ Email address (3) _____
- ☐ Academic department (4) _____
-

Q26 Have you worked with this faculty member before?

- ☐ Yes (1)
- ☐ No (2)
-

Display This Question:

If Have you worked with this faculty member before? = Yes



Q27 How long have you worked with this faculty member?

Q38 How did you hear about the SURE program?

☐

From a faculty member (1)

☐

From my advisor (2)

☐

From a past participant (3)

☐

Office of Student Research (8)

☐

Other (4) _____

Q28 I certify that the information that is provided in this application is accurate and complete to the best of my knowledge. I authorize each of my references to provide any information required by the University to consider this application, and I release all such persons and organizations from any claims by reason of furnishing such information for records and the right to review this information.

Furthermore, I authorize KSU Faculty, the Office of Admissions, Registrar, Financial Aid, and any other appropriate offices at Kent State University to release transcripts, grade reports, midterm evaluations and any other pertinent information to University College, Kent State University.

☐

I agree (1)

Q29 Electronic Signature

☐

Sign (1) _____

☐

Date (2) _____

Q30 Interested students will be notified of their application status.

NOTE: In addition to this application, the following information is required to complete your application packet:

One letter of recommendation from the faculty member who will be supervising your summer research. The faculty member will be contacted at the e-mail address you provided with instructions on how to submit this letter. **Do not submit your application without having approval from a faculty member who has agreed to mentor your summer research.**

Should you have any questions, please contact Ann Gosky at agosky@kent.edu

End of Block: Default Question Block
