WSUV SCHOOL OF ENGINEERING AND COMPUTER SCIENCE UNDERGRADUATE SUMMER RESEARCH

COMPUTER SCIENCE APPLICATION FORM

Personal Data

Name _____ Birth Date _____/_____/_____
Last First MI

Address _____
Street

_____
City State Zip Code

Telephone (_____) _____ E-mail Address _____

Academic Information

Current year in school Jr ☐ Sr ☐ Expected Graduation Date _____
Month & Year

Overall GPA (4.0 scale) _____

Previous research experience (outside laboratory courses) None ☐ Less than 50 hours ☐ More than 50 hours ☐

Plans for graduate/professional degree None ☐ MS ☐ PhD ☐

Research Interest Profile (check top 3 choices)

☐ Artificial Intelligence
☐ Data Management
☐ Graphics
☐ Software Security
☐ Wireless and Sensor Networking
☐ Software Engineering

Required Application Materials

Submit one stapled packet that includes each of the following:

- This **Application Form** completed and signed.
- A typed one-page **Personal Narrative Statement** which describes your interest in the Summer Undergraduate Research Program and your current goals.
- A current **Transcript** (official or unofficial)
- A one-page resume

Signature:

Applicant's Signature _____ Date _____

Send all application materials by mail to:

Eric Walla, Academic Coordinator
WSUV School of ENCS
14204 NE Salmon Creek Avenue
Vancouver, WA 98686-9600