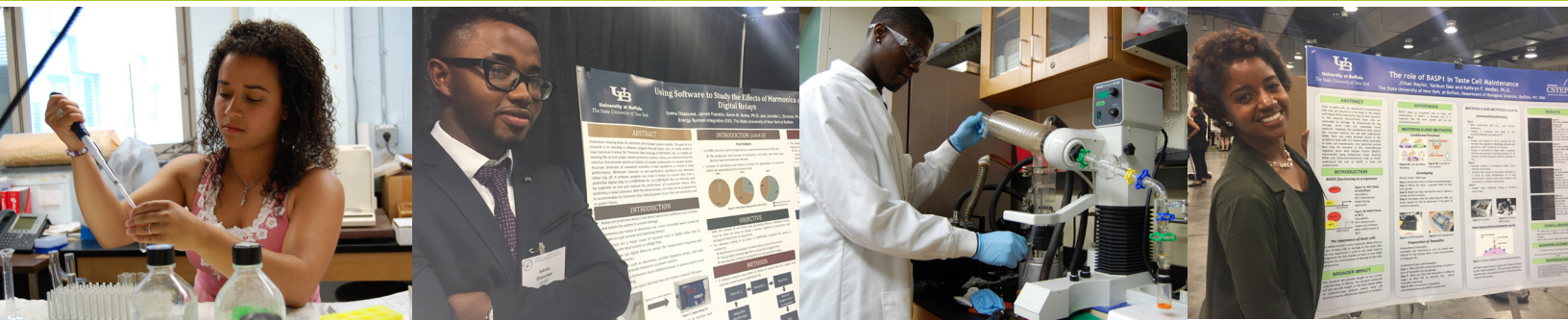


The Collegiate Science & Technology Entry Program presents...



CSTEP 2017 SUMMER RESEARCH PROGRAM

Application Deadline:

THURSDAY, MARCH 16, 2017

Students accepted into the program will be notified by March 31, 2017

Here's what's in it for you:

- \$3,300 Stipend & Meal Card
- Faculty Mentorship
- Intensive, Challenging Research Experience
- Research Methods Seminar (3-credits)
- Graduate School Preparation
- Networking with Professionals, Faculty, & Peers
- Weekend Fieldtrips
- Community Service
- Development of Soft Skills via Seminars with Experts
- All Expenses Paid to Attend & Present at the UB Undergraduate Research Conference

Total Value = \$4,800!

Send completed apps to:

Shanna Crump-Owens, Director
CSTEP Summer Research Program
University at Buffalo
222 Norton Hall
Buffalo, NY 14260
(716) 645-2234
sicrump@buffalo.edu

What's the Summer Research Program (SRP) about?

The CSTEP Summer Research Program (SRP) is an **intensive** research experience to enhance the competitiveness of talented underrepresented students pursuing the licensed professions or STEM majors. Participants will be better equipped to gain admission into graduate or professional school programs. Also, the CSTEP SRP will strengthen your research skills and expose you to the rigors of graduate study. Additionally, you will develop your research presentation abilities, learn about the culture of research, and *much more!*

Who's eligible for the SRP?

- U.S. citizen or permanent resident
- Underrepresented (African-American, Latino, Native American) or economically disadvantaged
- At least a rising sophomore with two semesters of science coursework completed
- UB students pursuing a STEM or allied health professions
- Minimum 2.8 GPA

How's the SRP structured?

8.5-week program from **June 6 – August 3, 2017.**

Students are matched with a faculty mentor to conduct research for 25 hours per week. Additionally, participants will attend a research methods seminar, workshops, and fieldtrips. The program culminates with our capstone Research Poster Symposium where students present their research to peers, faculty, and the University community.

How do I apply?

- Completed 2-part CSTEP SRP Application (on our website & in the office)
- Personal Statement
- Two Letters of Recommendation (faculty, supervisor, staff and/or advisors)
- Copy of UB Student ID
- Official College Transcript
- Résumé

FOR MORE INFORMATION ABOUT THE CSTEP SUMMER RESEARCH PROGRAM & THE APPLICATION:
VISIT OUR WEBSITE CPMC.BUFFALO.EDU/CSTEP/RESEARCH/SUMMER -OR- SCAN HERE





**COLLEGIATE SCIENCE & TECHNOLOGY ENTRY PROGRAM (CSTEP)
SUMMER RESEARCH PROGRAM (SRP) COVER SHEET**

Applications are due on or before Thursday, MARCH 16, 2017

SRP CHECKLIST:

- | | |
|---|--|
| <input type="checkbox"/> Official transcript(s) (copies are not accepted) with this Cover Sheet | <input type="checkbox"/> 1-2 page Personal Statement – include with this Cover Sheet |
| <input type="checkbox"/> Two Letters of Recommendation – can be emailed by sender (At least one from a faculty member or supervisor on letterhead) | <input type="checkbox"/> Resume with this Cover Sheet |
| <input type="checkbox"/> Copy of your Student ID | |

PART 1. CSTEP SRP BIOGRAPHICAL/ACADEMIC INFORMATION

Please print clearly *All information requested is required

BIOGRAPHICAL INFORMATION		
Name:		
Local/Campus Address:		
City, State, Zip Code:		
Local/Mobile Phone:	()	-
Email Address:		
Permanent Address:		
City, State, Zip Code:		
Person Number:		
Date of Birth:		
Gender:		
Ethnicity:		
United States Citizen:	Yes	No
Permanent Resident: _____ (Yes/No)	Alien Registration number:	-
Total Family Income:		
Number in Household:		
ACADEMIC INFORMATION		
Class Level:		
Major and GPA:		
Highest degree you plan to pursue: Master's/Doctorate/Professional		
Anticipated Graduation Date:		
Area of research you are interested in:		
Have you identified a faculty mentor? If so, please provide their name and contact information:		
Please list other programs that you have participated in or currently participate in:		

PERSONAL STATEMENT

1-2 pages (12-pt font with 1-inch margins) describing your interest in STEM or the allied health professions, research, and the Summer Research Program. Include your prior research experiences, academic plans, as well as your short and long term professional goals. Lastly, how can the CSTEP SRP contribute to your goals and professional aspirations, and what do you hope to gain and accomplish, if selected?





**COLLEGIATE SCIENCE & TECHNOLOGY ENTRY PROGRAM (CSTEP)
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Applications are due on or before Thursday, MARCH 16, 2017

REFERENCES

List 2 anticipated references (at least one faculty member) and provide a letter of recommendation from each:

1. Name: _____ Title: _____

2. Name: _____ Title: _____

PART 2. CONTINUE TO ONLINE APPLICATION FOR CSTEP SRP

Please follow this link <http://tinyurl.com/cstepsummer> for the application. Please see CSTEP staff if you have any questions with the application process.

STATEMENT OF UNDERSTANDING

The CSTEP Summer Research Program is designed to benefit talented students who are in serious pursuit of advanced degrees in STEM and the allied health professions, where there is a critical shortage of underrepresented students. I certify that the information in my application is accurate and complete. If selected, I understand that this is a full-time commitment and I agree to participate in ALL aspects of the summer research program. Failure to do so will result in additional requirements in order to receive stipend(s).

Applicant's Signature: _____

Date: _____

<p align="center"><u>Submit completed application to:</u> Shanna Crump-Owens, CSTEP Director University at Buffalo 222 Norton Hall Buffalo, NY 14260 Email: sicrump@buffalo.edu (716) 645-2234</p>
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**COLLEGIATE SCIENCE & TECHNOLOGY ENTRY PROGRAM (CSTEP)
SUMMER RESEARCH PROGRAM (SRP)**

Recommendations are due on or before Thursday, MARCH 16, 2017

-RECOMMENDATION FORM-

TO BE ENCLOSED WITH LETTER OF RECOMMENDATION

TO BE COMPLETED BY APPLICANT

Name: _____

Email: _____ Phone: () - _____

Under the Family Education Rights and Privacy Act, a student participating in the CSTEP Summer Research Program has access to his/her program file. CSTEP wishes to comply with this law, while still allowing the student to waive the right to access. If you wish to waive the right to examine this recommendation later, please sign here:

Applicant's signature: _____ Date: _____

TO BE COMPLETED BY RECOMMENDER

An application for admission to the CSTEP Summer Research Program requires recommendations from two individuals who are capable of judging the professional and academic promise of the applicant. Return this recommendation form with a letter of reference in a sealed envelope, with your signature written across the seal, by **Thursday, March 16, 2017**. The recommendation could be returned **via email with the Subject Line "SRP Recommendation Letter"** or brought to the following:

Shanna Crump-Owens
CSTEP Director
University at Buffalo
222 Norton Hall
Buffalo, NY 14260
Email: sicrump@buffalo.edu
(716) 645-2234

Recommender's Name: _____ Title: _____

Address: _____

Telephone: () - _____ Email: _____

In what capacity do you know the applicant? _____

How long have you known the applicant? _____

How does this applicant compare with her or his peer group in academic ability?

Exceptional Above Avg. Avg. Below Avg.
 (Among the very (Top 25%) (High ability) (Lower 50%)
 best you have known)

The CSTEP program would appreciate a candid statement from you concerning the applicant named above. **Please comment in detail** concerning the applicant's accomplishments, abilities, character, and capacity for success as a student in the summer research program.

Signature

Date





COLLEGIATE SCIENCE & TECHNOLOGY ENTRY PROGRAM (CSTEP)
SUMMER RESEARCH PROGRAM (SRP)

Recommendations are due on or before Thursday, MARCH 16, 2017

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Recommender's Name: _____ Title: _____

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In what capacity do you know the applicant? _____

How long have you known the applicant? _____

How does this applicant compare with her or his peer group in academic ability?

Exceptional (Among the very best you have known) [] Above Avg. (Top 25%) [] Avg. (High ability) [] Below Avg. (Lower 50%) []

The CSTEP program would appreciate a candid statement from you concerning the applicant named above. Please comment in detail concerning the applicant's accomplishments, abilities, character, and capacity for success as a student in the summer research program.

Signature _____

Date _____

