

UROP Spring 2021 Application Form



Directions

Dear UROP Applicant,

IMPORTANT: For Spring 2021, international students residing outside the US during the semester are not eligible to receive salary funding from Boston University. Therefore, we cannot accept applications from international students conducting research outside of the US. Additionally, if you receive funding, and then move outside of the US, you will need to withdraw from UROP as we will not be able to pay you.

As you prepare your application for funding from the Undergraduate Research Opportunities Program (UROP), **please read these instructions carefully**. For more information on funding, eligibility, and any restrictions, [please consult our website here](#).

Only online submissions of applications will be accepted. Students can submit only one application per semester.

A completed UROP application consists of this online application form and a letter of recommendation form completed by your BU faculty mentor. An online submission of your **application is due by 12:00PM (noon) on the day of the deadline**. Your faculty mentor must complete an **online recommendation form by 11:59PM on the day of the deadline**. Please discuss time commitment, award type, and expectations with your mentor prior to submitting your application. If there are any time or award request discrepancies between you and your mentor, we will consider you for the lowest requested amount.

Upon submitting this application, your mentor will receive a prompt to submit your letter of recommendation along with a copy of your application. With that said, **it is your responsibility to ensure your faculty mentor completes the letter of recommendation form**. If your mentor is looking to submit their letter of recommendation, direct them to the "for mentors" page on the UROP website, where they will log in with their Kerberos information and complete the form.

Keep your responses within the word limit of each field; you may not continue your responses in the Appendix.

If you have any questions or encounter difficulties, it is your responsibility to contact the UROP Office at urop@bu.edu or call 617-353-2020.

Statistical Data Collection Page

Providing information on this page is strictly voluntary, and this page will not be included when your application is sent to reviewers. Data are collected solely for statistical purposes for reporting to agencies that request such

information (including granting agencies that supply funding to UROP) and for evaluating our program. The data will not be used during the evaluation or award process.

Please select your race/ethnicity:

- African-American/Black
- Asian
- Caucasian/White
- Hispanic/Latino
- Native American
- Pacific Islander or Native Hawaiian

Please select your immigration status:

- US Citizen
- US Permanent Resident ("Green Card")
- Foreign National/International Student

Please select your gender:

- Male
- Female

Please enter your GPA:

How did you hear about UROP? (check all that apply)

- From my mentor
- From another professor
- From a non-UROP staff member
- Through a BU website
- Listened to UROP staff speak to a student group/class
- From a Classmate/Friend

Is your research within the STEM Fields?

Would you be interested in being a mentor for an underrepresented minority student in high school that is looking to conduct research in STEM during the summer?

As you indicated yes, can we share your email with a BU student-led program that is trying to start a program that mentors underrepresented minority high school students in STEM during the summer?

Applicant Information

First Name *

Last Name *

Preferred Name (if different than above)

Preferred Pronouns *

BU ID Number *

BU E-mail Address *

example@example.com

College *

Major *

Year at BU (during AY20/21) *

Will you be a full-time student (defined as being enrolled in 12 or more credits) during the semester that you are applying? *

Yes, I will be enrolled in 12 or more credits during the semester for which I am applying for funding.

No, I will be enrolled in fewer than 12 credits during the semester for which I am applying for funding.

As you will not be a full-time enrolled student (defined as being enrolled in 12 or more credits) during the semester for which you are applying for funding, you are not eligible to apply for funding.

As you will be a full-time-enrolled student (defined as being enrolled in 12 or more credits) during the semester for which you are applying, you are eligible to apply for UROP. If you reduce your credit load during the semester to less than 12 credits, you must withdraw your UROP funding, as you will no longer be eligible for funding.

The month and year you will receive your bachelor's degree *

Faculty Mentor's First Name *

Faculty Mentor's Last Name *

Your mentor must be a member of the Boston University faculty. Neither postdocs nor graduate students may serve as the mentor of record for UROP projects.

Faculty Mentor's College *

Faculty Mentor's Department *

Faculty Mentor's BU Email Address *

example@example.com

Have you worked with this mentor before? *

Yes

No

For how long? *

Where will you be performing your research? *

Will you be conducting your research in the United States? *

Yes, I will be in the United States while I am conducting research.

No, I will not be in the United States while I am conducting research

If you are an international student conducting research outside of the US, you are not eligible for funding. Do not complete this application. Additionally, if you are awarded funding, and you must leave the US, you must withdraw from UROP as we will not be able to pay you.

Will you be receiving any academic credit for this research work? If yes, then you may only apply for a Supplies Award. *

Yes

No

Award Types

Faculty Matching Grant (FMG): a stipend half of which is provided by UROP (the amount chosen below) and

half is provided by your mentor. Ensure that your mentor has matching funds. For a Faculty Matching Grant (FMG), your faculty mentor must have matching funds totalling half of your requested award amount. For example, if you apply for a total award of \$1,350.00 (10 hours/week), your mentor must provide \$675.00 in matching funds.

Student Research Award (SRA): a stipend that is funded entirely by UROP.

Supplies Award: funds that are provided to the mentor's department to cover supplies needed for the research project. You may only apply for a supplies award or a stipend award, not both.

For what type of award are you applying? *

Please select the approximate number of hours you will be working: *

Please select the approximate number of hours you will be working: *

What amount are you requesting? *

Are you a Kilachand Honors College student? *

Yes

No

Is this application for your Honors College project? *

Yes

No

Have you previously been awarded UROP funding? *

Yes

No

When did you receive funding? (Please list all semesters) *

Previous UROP Funded Project

Is this a continuation of a previously funded project? *

Yes

No

Summarize the status of your project to date. Provide information on any results and detail new goals you wish to achieve. Include an explanation of why more funds are necessary. *

0/3000

Do you feel that your previously funded UROP project was completed? *

Yes

No

Provide a brief justification for why the project was not completed. *

0/1500

Provide a description of your previously-funded project. Include any results you obtained. *

0/3000

List goals from your previously funded application and approximate the percentage of each goal that has been completed. *

0/1500

Project Information

Project Title *

0/500

Project Description and Goals - Provide a description of your research proposal written in terms that can be understood by someone outside your field. Include your project's overall objectives as well as the specific goals you plan to accomplish this semester. *

0/3000

Project Significance/Importance - Explain in general terms why the information gained from this research project will be beneficial. What is the bigger picture of your research project? *

0/1200

Methodology/Process - Clearly state how you plan to accomplish the goals listed in your project description. Identify the specific steps necessary to perform your research. *

0/3000

Time Line - Provide a detailed timeline for completion of goals of your project. Include goals listed above. *

0/1800

Background Experience - List any previous research experience, applicable course work, or other relevant experience you may have. *

0/2000

Bibliography - List the sources you have consulted in preparation of this proposal, as well as any references you have cited within this application. *

0/2500

Emergency Preparedness and Ability to Conduct Research Remotely If Necessary

Disclaimer: The ability to adapt your plan to remote research will not affect how your application is scored. We ask this information to streamline the transition of your work to a remote setting if the situation arises.

Does this research require you to use Boston University facilities? Please note: if your research is being conducted in a Boston University facility, and your award is funded, you will need to show proof that you are part of your mentor's approved plan for return to research. *

Yes, my research involves me physically being at a Boston University facility.

No, I can conduct the research project remotely.

If, for any reason, Boston University goes remote during the fall semester, will you be able to adapt your project to be conducted remotely? *

Yes

No

If your project must be completed remotely, how will you alter your project goals, methodology, and/or research timeline to accommodate the shift? *

If you are applying for a Supplies Award and this page is blank, please return to the Applicant Information page and change your answer to yes.

Otherwise, please click "Next".

Supplies Award Request

Supplies Awards are typically under \$500. If you are applying for a Supplies Award, please provide a detailed description of what you wish to purchase. Indicate the price per unit and the total estimated cost for each item. Unused lines should be left blank. Supplies Award funds **may not be used for travel**. All applications for travel must be submitted on a separate travel application, which can be found on the UROP website. If you are not applying for a Supplies Award, please change your answer to "No" under the Supplies Award question at the bottom of the Applicant Information page.

Item Name & Price per Unit *

Estimated Cost *

Type a question

Type a question

Type a question

Type a question

Type a question

Type a question

Type a question

Type a question

Type a question

Type a question

Supplies Award Justification - Describe the role the requested materials will play in your research and explain your need for each item. *

0/1800

Safety Training

All students working in laboratories that use certain hazardous materials are required by the Office of Environmental Health & Safety to complete training to work with those materials. Animal Safety courses are coordinated by the Laboratory Animal Care Facility.

Does your research environment require you to take safety training? If you are unsure, please ask your mentor.

Laboratory Safety *

Yes

No

taken on:



Month Day Year

Radiation Safety *

Yes

No

taken on:



Month Day Year

Laser Safety *

Yes

taken on:



Month Day Year

X-Ray Safety *

Yes

No

taken on:



Month Day Year

Animal Safety *

Yes

No

taken on:



Month Day Year

If you have not taken the required training(s), provide the date(s) when you will fulfill the requirement(s).

Human Subjects and Animal Use

If you are going to be using animals in your research, has the Animal User New Project Application been approved by the Institutional Animal Care & Use Committee (IACUC)? If yes, upload a copy of the approval letter. If no, explain in the box below.

Yes

No

IACUC Approval Letter - This must be titled as "**Last Name, First Name IACUC**"

Only .pdf files will be accepted.

If your research will involve humans, has it been approved by the appropriate Boston University Institutional Review Board (IRB)? If yes, upload a copy of the approval letter. If no, explain in the box below.

Yes

No

IRB Approval Letter - This must be titled as "**Last Name, First Name IRB**"

Only .pdf files will be accepted.

Additional Explanation:

Appendix

This section is not required. You may upload 1 page of additional information only if you feel it is relevant to your application and is not a resume or CV. Please be aware that you may not continue your answers in this section; if you do so, it will be removed from your application. Your answers to previous questions must fit within the limits of the boxes provided.

If you upload an appendix, you MUST title it "**Last Name, First Name Apx**". If your appendix is not labeled according to these directions, we cannot guarantee that it will be evaluated with your application.