



Graduate Junior Research Associates Program Application Form

A. GENERAL INFORMATION

Name _____

Identification Number _____

Residential Address _____

Mailing Address (if different) _____

Telephone Number _____ Day _____ Night _____

e-mail Address _____ Fax Number _____

Gender _____ Age _____ Ethnic Origin _____

U.S. Citizenship Yes No Permanent Resident Yes No

B. EDUCATIONAL BACKGROUND

When did you start your Graduate studies? _____

What Program are you enrolled in? _____

Which University/ campus are you enrolled in? _____

What undergraduate program did you graduate from? _____

Which University/campus did you graduate from? _____

When did you graduate? _____

C. PREVIOUS RESEARCH EXPERIENCES: (Use additional pages)

Describe:

1. Any previous research experience.
2. List of publications and presentations.

3. Extracurricular activities (organizations, clubs, etc.).
4. Statement of Purpose

D. ADDITIONAL DOCUMENTS

The following documents are to be submitted with your application in order to be considered:

1. Resume
2. Title of Research Proposal
3. Research Proposal (5 pages limit)
4. Official transcripts from all undergraduate and graduate institutions.
5. Two letters of recommendation one of which must be from the research faculty mentor (use the form included).

SEND ALL DOCUMENTATION TO:

Dr. Jose Rodriguez Orengo-STCE Director and Dr. Loyda Mendez-STCE Coordinator

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lbmendez@uagm.edu