

**UNIVERSITY OF LOUISVILLE  
DEPARTMENT OF PHYSIOLOGY**

**SUMMER UNDERGRADUATE RESEARCH PROGRAM IN CARDIOVASCULAR  
RESEARCH FOR UNDER-REPRESENTED MINORITIES AND DISADVANTAGED STUDENTS**

**Application Form**

**DEADLINE MARCH 1**

**Name** \_\_\_\_\_ **Social Security #** \_\_\_\_\_

**Contact Address**

\_\_\_\_\_ **Street** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Current Telephone** \_\_\_\_\_ **Alternate Telephone** \_\_\_\_\_

**E-mail Address** \_\_\_\_\_

**Gender** \_\_\_\_\_ **Racial Status/Ethnic Origin (required)** \_\_\_\_\_

**School Currently Attending** \_\_\_\_\_

**Major** \_\_\_\_\_ **Expected Graduation Date** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
mm dd yyyy

**Grade Point Average: Overall** \_\_\_\_\_ **in Major** \_\_\_\_\_

**Which generalized research areas interest you?**

**Please rank:**

<b>1.</b> choose one	if other please list:
<b>2.</b> choose one	if other please list:
<b>3.</b> choose one	if other please list:

**What types of work or research experience have you had? (limit of 300 characters, 3 lines)**

**What laboratory, technical or programming skills do you have? (limit of 300 characters, 3 lines)**

- Additional Requirements:**
1. A copy of your transcript (photocopies are acceptable).
  2. A letter of recommendation sent by a professor.
  3. A short (one page maximum) letter on why this program interests you.
  4. Must be U.S. Citizen or Permanent Resident.
  5. Disadvantaged students should state the nature of their disadvantage status.

**Return to:** Irving G. Joshua, Ph.D. (IGJOSH01@LOUISVILLE.EDU)  
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