

**APPLICATION FOR ADMISSION
TO THE UNDERGRADUATE RESEARCH PROGRAM
CENTER FOR LUNG BIOLOGY
College of Medicine
University of South Alabama
Mobile, AL 36688
(251) 460-6815; FAX: (251)460-7452**

I. INSTRUCTIONS

A. Complete this form and mail to:

**Dr. Mary I. Townsley
Director, Training Programs
Center for Lung Biology, MSB 3370
University of South Alabama College of Medicine
Mobile, AL 36688-0002**

II. PERSONAL DATA

1. Name _____

First
Middle
Last
2. Permanent address _____

Street
City
State
Zip
3. Present address _____

Street
City
State
Zip
4. Phone No. _____
5. Date of birth _____
6. Place of birth _____
7. Citizenship _____
8. Social Security Number _____
9. Email _____

III. EDUCATIONAL DATA

1. List the high school from which you graduated and ALL college(s) attended:

Name of School	City and State
_____	19__-19__
_____	19__-19__
_____	19__-19__
_____	19__-19__
_____	19__-19__

2. What is your major field? _____ What is your minor field? _____
 When do you expect to receive your degree? _____
3. Cumulative undergraduate grade point average ____ on a scale of _____
4. Scores on standardized examinations taken before college:
 - a. Scholastic Achievement Test (SAT): Verbal _____ Math _____
 - b. American College Test (ACT): English _____ Math _____
 Natural Science _____ Social Science _____

5. Scores on standardized examinations taken while in college:
- a. Graduate Record Examination (GRE): Date _____
 Verbal _____ Quantitative _____ Analytical _____
- b. Medical College Admissions Test (MCAT): Date _____
 Combined Score _____

6. Memberships in Clubs and Societies

7. Summarize any research experience you have had outside normal classwork/laboratories:

8. Summarize your reasons for wanting to participate in a summer research program:

9. Please supply **two** letters of recommendation from individuals who are knowledgeable of your academic and scientific achievements. These persons are:

Name	Position	Address	Telephone

9. Please supply a **copy of your college transcript** as a part of your application materials.

IV. I certify that the statements in this application are true and complete to the best of my knowledge.

Signature _____ Date _____

The University of South Alabama provides equal educational opportunities to and is open and accessible to all qualified students without regard to race, color, creed, national origin, sex, or qualified handicapped/disability, with respect to all of its programs and activities.