## Professional Research Experience Program A cooperative program between the National Institute of Standards and Technology and CU Boulder. UNDERGRADUATE STUDENT APPLICATION

| Contact: Tiffany Mason Phone: 303-492-4122 tiffany.mason@colorado.edu  Address: University of Colorado Boulder, DUAN D1B37, Physics - 390 UCB, Boulder, CO 80309 |                    |                    |            |  |  |
|--|--------------------|--------------------|------------|--|--|
| Student Information: Please type or print neatly   |                    |                    |            |  |  |
| Name (Last, First, Middle Initial) Student Number  |                    |                    |            |  |  |
|  |                    |                    |            |  |  |
| Present Address (City, State, Zip Code)  |                    | Phone(s):          |            |  |  |
| Email Address(es):   |                    |                    |            |  |  |
|  |                    |                    |            |  |  |
| Current Program Major: Program Hours Complete  |                    | ed: GPA:           |            |  |  |
|  |                    |                    |            |  |  |
| Please list other degrees you hold: (Give degree, granting institution, and date received.)  |                    |                    |            |  |  |
|  |                    |                    |            |  |  |
|  |                    |                    |            |  |  |
|  |                    |                    |            |  |  |
| Have you ever been granted a U.S. Government   |                    | Granting Agency:   |            |  |  |
| Security Clearance?  | Date of Clearance: |                    |            |  |  |
| Professional or Personal   | References:        | Dute of cicarance. |            |  |  |
| List three (3) persons:  |                    |                    |            |  |  |
| Name   | Address            | Daytime Phone      | Occupation |  |  |
|  |                    |                    |            |  |  |
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| 1:   |                    |                    |            |  |  |
| List any foreign languages you speak or read   |                    |                    |            |  |  |
| Do you speak these languages fluently and or read them proficiently?   |                    |                    |            |  |  |

| Scholarships and Grants:  |                                     |                    |   |  |  |
|---|-------------------------------------|--------------------|---|--|--|
| Name of Scholarship<br>or Grant   | Organization Sponsoring Scholarship | Scholarship Amount | Dates Scholarship<br>Applied to Tuition |  |  |
|   |                                     |                    |   |  |  |
|   |                                     |                    |   |  |  |
|   |                                     |                    |   |  |  |
| Special Honors or Awards:   |                                     |                    |   |  |  |
|   |                                     |                    |   |  |  |
|   |                                     |                    |   |  |  |
|   |                                     |                    |   |  |  |
| Student Signature   |                                     | Date               |   |  |  |
| Please email or mail your signed application to Tiffany Mason, contact info on page 1, along with your resume, official grade transcript, and one letter of recommendation. |                                     |                    |   |  |  |