The Henry Samueli School of Engineering
Accelerated Status Undergraduate Research Fellowship Application

Instructions:
1. Fill out this form and attach a one page research proposal and a letter of recommendation and letter of recommendation form from your research advisor.
2. Submit the completed packet to the Engineering Graduate Student Affairs Office (305 Rockwell Engineering Center) no later than the Monday before the funding Quarter begins.
3. Please note that this process must be completed for EACH of the 3 quarters you are eligible to apply for the Accelerated Status Undergraduate Research Fellowship Program.

Criteria:
1. Must be a participant in The School of Engineering Accelerated Status Program
2. Be a Junior or Senior Engineering student.
3. Have completed one quarter of Engineering undergraduate research with a satisfactory/passing grade.

Name: Student ID:
Major: Level: □ Junior □ Senior
Research Advisor:
Telephone Number:
Email Address:
Cumulative GPA:

Proposal
Please attach a one-page research proposal/personal essay addressing the following:
1. The nature of the research project.
2. Your plans for graduate school or your future career, including how you intend to use this research in your next endeavors.

Application Checklist:
□ Completed Application
□ One-page research proposal/personal essay
□ Confidential letter of recommendation and letter of recommendation form from your research advisor.
This letter must include the following: general observations regarding the student and his/her research, the amount of matching funds (required) and how the funds will be used.

Please return the application and materials to:
Graduate Student Affairs
The Henry Samueli School of Engineering
University of California, Irvine
305 Rockwell Engineering Center
Irvine, California 92697
Phone: (949) 824 – 4334 Fax: (949) 824 – 3440

Please contact Jean Bennett with questions at jean.bennett@uci.edu

Student ___________________________ Date ___________________________

Graduate Student Affairs Staff Use Only (date and initial): ___________________________
Date entered Accelerated Program: ________ URF Quarters (1, 2, 3): ________________
The Henry Samueli School of Engineering
Accelerated Status Undergraduate Research Fellowship Application

Faculty Advisor Recommendation Form

This Undergraduate Research Fellowship award provides a maximum of $3000 in funds to be used as a research fellowship. This award will provide a salary for a maximum 19 hours of work per bi-weekly pay period during the entire quarter. With this letter of recommendation, you agree to contribute 50% of matching funds toward the student’s research experience (please see below for more details).

To be filled in by the student and given to the faculty advisor

Name: ________________________________________________________________
Student ID #: _________________________________________________________
Email Address: _________________________________________________________
I am applying for this fellowship during (quarter/year): _________________

To be filled in by the research advisor:

Name: ________________________________________________________________
Department: ___________________________________________________________
Email Address: _________________________________________________________

Recommendation Letter Details
Please attach a letter detailing the following:

- general observations regarding the student and his/her research,
- the amount of matching funds (must be at least 2:1 ratio)
  - For example, if you provide the maximum of $1500 matching, your student will be able to earn a maximum of $3000 in salary. If you provide less than the maximum, the maximum salary earned will be calculated on a 2:1 basis.
- how the funds will be used
  - For example, supplies, chemicals, consumables, lab fees and/or additional salary above the $3000 maximum from the fellowship itself.

Please place this form, as well as the recommendation letter, in a signed, sealed envelope and return it to the student for submission with the Undergraduate Research Fellowship Application.
Thank you for your support!

Graduate Student Affairs Staff Use Only (date and initial): _______________________
Matching Funds: ___________________ Use of Funds: ___________________