Complete the form - scan and e-mail to mcginnr@temple.edu or drop off completed form in the CST Advising office – Paley Library – First Floor
If you have any questions please contact Rose McGinnis at mcginnr@temple.edu

NOTE – Both pages must be complete to be approved by the CST Deans Office

All Forms are due by Thursday April 26th, 2017

Faculty Sponsor Information
Name _______________________ Signature __________________ Date ________
Department/School _______________________ Phone Number __________________
Project Title ____________________________
Faculty Research Account __________________ (required)
Department Payroll Contact Name: __________________email: __________________
(Information must be provided so that students can be placed on payroll in the department)

Student Information
Name _______________________ Signature __________________ Date ________
9-digit TUID ____________ CST Major __________________________
Cell Phone Number: __________________________
Have you ever been on Temple Payroll? Yes ___ No ___
Have you participated in URP in the past? Yes ___ No ___ If Yes what semester ________
Are you planning on taking summer classes? Yes ___ No ___
If Yes please list ______________________
(Enrollment in summer classes is restricted to only the 4 week term and the 12 week term – please contact Rose for any questions)

Research Information
Estimated number of hours per week __________ Hourly Rate __________
Estimated number of weeks to work over the summer __________
Start Date ___________ End Date ___________ (Earliest Start Date – 5/15 Latest End Date 8/25)

Approval Signatures (required)
Chairperson of Faculty Sponsor Department
Name _______________________ Signature __________________
This information must be complete and should be typed with graphics inserted as appropriate

Project Title: ___________________________________________________________

_______________________________________________________________________

_______________________________________________________________________

Project Description you must provide:

1) A short paragraph describing the most important background information along with one or two references to the most current literature dealing with the problem to be undertaken.

2) A short paragraph or two describing the contribution to the research project that you, the student expects to make during the time period of this research project. Please follow the scientific method by stating a hypothesis and outline your planned experiments or research approaches to test the hypothesis, being as specific as possible.

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CST Deans Office Approval __________________________

For CST Approval Process only: This will be completed after the form is sent to Rose McGinnis

Approver – Dr. Mike Lawlor _________________________________ Date ________

Date Received: _______________ Current academic status: _____ Number of Previous URP Semesters: _______

Payroll verified: ________________________________

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