

**Undergraduate Research Program (URP)  
Revised Approval Form  
Fall 2017**



Complete the form - scan and e-mail to [mcginnr@temple.edu](mailto: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 [mcginnr@temple.edu](mailto:mcginnr@temple.edu)

**NOTE – This is a 2-page form - both pages must be complete to be approved by the CST Deans Office**

**All Forms are due by Wednesday, September 6<sup>th</sup>, 2017**

**Faculty Sponsor Information**

Name \_\_\_\_\_ Signature \_\_\_\_\_ email \_\_\_\_\_

Department/School \_\_\_\_\_ Phone Number \_\_\_\_\_ Date \_\_\_\_\_

Project Title \_\_\_\_\_

Faculty Research Account \_\_\_\_\_ (required)

**Please see page 2 for additional required research project information**

**Student Information**

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ email: \_\_\_\_\_

9-digit TUID \_\_\_\_\_ CST Major \_\_\_\_\_ Phone Number \_\_\_\_\_

Have you participated in URP in the past? Yes \_\_\_ No \_\_\_ If Yes what semester \_\_\_\_\_

Have you ever been on Temple Payroll? Yes \_\_\_\_\_ No \_\_\_\_\_

**Research Course Information - You must register for the research course prior to submitting form**

Dept # \_\_\_\_\_ Course # \_\_\_\_\_ Section # \_\_\_\_\_ CRN \_\_\_\_\_ Credits hours \_\_\_\_\_

Hours per week spent in lab for course contact hours (must be at least 3 times the credit hours) \_\_\_\_\_

**If you are taking a Biology or Chemistry research course, you must complete the department-required forms to be eligible to complete your research – please see the Faculty Advisor in the Biology or Chemistry department for additional information.**

**Department Approval Signature (required)**

Faculty Advisor in CST Department where the student is taking the course must approve the research course

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

The following information **MUST** be included for your application to be considered. This page should be typed, with graphics inserted as appropriate. You can attach an additional page if necessary.

**Project Title:**

**Project Description**

- 1) A short paragraph describing the most important background information about your project:
  
  
  
  
  
  
  
  
  
  
- 2) One or two references to the most current literature dealing with the problem to be undertaken:
  
  
  
  
  
  
  
  
  
  
- 3) Describe the contributions to the research project that you, the student, expect to make during the semester. Please state a hypothesis and outline your planned experiments or research approaches to test the hypothesis, being as specific as possible. If your project is more discovery-based, please state the overall research goal instead of a hypothesis:

**Hypothesis or research goal:**

**Outline your planned experiments or research approaches to test the hypothesis:**

**CST Dean's Office Approval**

This section completed by the CST Dean's office after form is submitted to Rose McGinnis – [mcginnr@temple.edu](mailto:mcginnr@temple.edu)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Date Received: \_\_\_\_\_ Academic status: \_\_\_\_\_ Registration \_\_\_\_\_ Number of Previous URP Semesters: \_\_\_\_\_