



Summer Research Request Form

SUBMIT TO: Alberto Gonzalez (albertg@austin.utexas.edu)

STUDENT INFORMATION

Name: _____ Date: _____

UT EID: _____ Email: _____ Phone: _____

Summer address: _____

Do you need Summer Session II on-campus housing? No Yes

ACADEMIC INFORMATION

Research Topic: _____

Research Advisor: _____ Department: _____

Program: _____ Contact: _____

Institution: _____ Duration: _____

RESEARCH DESCRIPTION

If applying for an external program, provide program justification:

Does the program require out of pocket costs?	No	Yes	<i>If yes how much \$</i> _____
Does the program offer a stipend?	No	Yes	<i>If yes how much \$</i> _____
Will you be requesting a Mellon stipend?	No	Yes	<i>If yes how much \$</i> _____