

The MIT Summer Research Program (MSRP) is an institutional effort to help facilitate the involvement of talented students in research aspects of the fields of engineering and science, in particular those from disadvantaged backgrounds such as under-represented minorities, or first-generation college students.

This summer program seeks to identify talented undergraduates from around the country who could benefit from spending a summer on MIT's campus, working in a research laboratory under the tutelage and guidance of experienced scientists and engineers - MIT faculty members, postdoctoral fellows and advanced graduate students.

Students who participate in this program will be better prepared and motivated to go on to a Ph.D. degree, thereby helping to curtail underrepresentation in critical fields of scientific investigation.

Massachusetts Institute
of Technology

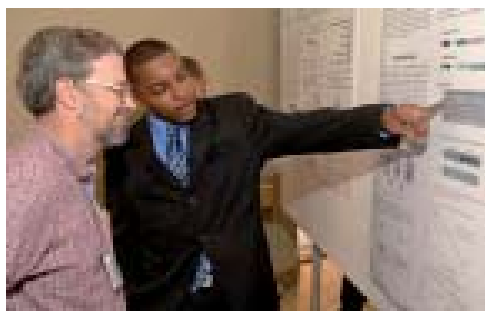
Summer

Research

Program

2009

MIT Summer Research Program



Program Features

- Supervision by an MIT faculty member, postdoctoral fellow or advanced graduate student
- Weekly research presentation by MIT faculty
- Weekly seminars on issues directly related to the academic, personal and professional growth of interns
- Social outings (barbecues, boat cruise, visits to Boston area, etc.)
- Preparation of an abstract, research paper and graduate school statement of purpose
- Poster presentation at the end of the program
- Individual counseling on academic careers
- Constructive feedback on the need for further undergraduate courses and acquisition of additional laboratory skills
- Opportunity to possibly co-author a scientific paper with the faculty mentor
- Exposure to state of the art research laboratories in MIT departments and over 60 interdisciplinary centers on MIT's campus
- Hands-on training in active, "real-world" laboratories

Application Deadline

- All paper applications must be postmarked and all electronic applications must be submitted by **February 1, 2009**. There will be no exceptions. We strongly encourage you to submit your completed application early.

Program Duration

- 9 Weeks (June 7 through August 9, 2009)

Applicants

- Must be U.S. Citizens, permanent residents or on an F-1 Visa
- Must not graduate before December 2009
- Should have a B+ (3.5/4.0) GPA or higher
- Must have a genuine interest in research, pursuing a Ph.D.

Participants Receive

- A weekly stipend (\$375.00)
- Round-trip travel and on-campus housing (Food expenses will be the responsibility of the student)
- A certificate of program completion
- Access to MIT campus facilities

Application Requirements

- Three evaluations (Two from current faculty in the fields of science and/or engineering)
- Official academic transcript(s) (Copies may be submitted until originals are available)
- List of Fall courses and planned Spring courses
- Completed application form

Submit Application to:

Monica Orta
MIT Summer Research Program
Office of the Dean for Graduate
Education
77 Massachusetts Ave., 3-138
Cambridge, MA 02139-4307
Tel: (617) 253-4846
Fax: (617) 253-5620

Submit Biology Application to:

Dr. Mandana Sassanfar
MIT Summer Research Program
Department of Biology
77 Massachusetts Ave., 68-102C
Cambridge, MA 02139-4307
Tel: (617) 452-4371
Fax: (617) 258-9329

Biology Application:

[web.mit.edu/biology/www/outreach/
college.shtml](http://web.mit.edu/biology/www/outreach/college.shtml)

Please email any questions to:
MIT-SRP@MIT.EDU

**Massachusetts Institute of Technology
Summer
Research
Program**

Application Form

***Biology applicants should use the biology application
Deadline: February 1, 2009**

Please Type or Print Clearly • All information requested is required

1
Name: _____

First Middle Initial Last

2
Date of Birth: / / Gender: Female Male U.S. Citizen F-1 Visa
 Permanent Resident

Month Day Year If Permanent Resident Indicate country of origin above

Race/Ethnicity: African American or Black Caucasian Puerto Rican
 Chicano(a) or Mexican American Native American Other:

If other please specify

3
Current Address: _____

Street City State Zip code

Telephone: () Email: _____

4
Permanent Address: _____

Street City State Zip code

Telephone: () Mobile Phone: ()

5
College or University: _____ Grade Point Average: _____ on 4.0 5.0 scale

Indicate GPA and check appropriate grade scale

6
Major: _____ Major 2: _____ Classification: Sophomore Junior Senior

If applying as a Senior you cannot graduate before December 2009

7
Honors Program: AMP MBRS Other
 MARC McNair N/A Anticipated Graduation Date: / /
If other please specify (Month / Year)

8
Name of Faculty Advisor: _____ Title: _____

Address: _____

Street City State Zip code

Telephone: () - Email: _____

9
Have you applied to this program before? Yes / No If so, what year?

10
Have you participated in this program before? Yes / No If so, what year?

11
References
(At least two need to be from faculty members. If you have research experience, please include a recommendation from your research supervisor.)

Name/Position School/Company Title Telephone Email

Name/Position School/Company Title Telephone Email

Name/Position School/Company Title Telephone Email

12

Refer to the program website and web.mit.edu/research for a list of research areas. Please list three research areas of interest and identify three faculty members with whom you would like to work. There is no guarantee that, if accepted, you will work with these faculty members.

| | | |
|---------------|-----|----------------|
| Research area | Lab | Faculty member |
| Research area | Lab | Faculty member |
| Research area | Lab | Faculty member |

Please respond to the following on separate paper

13

Describe one prior research experience. If no prior experience, please indicate. (Maximum of 500 words.)

14

Discuss your long term research goals. (Maximum of 500 words.)

15

Please describe your reasons for wishing to undertake graduate study at the doctoral level and your career objectives. In addition, please identify the contributions that you wish to make to your chosen field of study as well as to your community. This statement gives the reviewers a greater understanding of your academic, personal and professional qualifications to participate in MSRP. (Maximum of 500 words.)

16

Often, we begin to understand our own opinions only after they have been contested by other people. Describe a disagreement you have had. What, on the surface, did it appear to be about? What do you feel it was really about? How did you handle the situation and what was the outcome of the disagreement? What did you learn from it? (Maximum of 500 words.)

17

In MSRP, we are committed to building an academically superb and widely diverse educational community. Describe an experience you have had where cultural diversity (or lack thereof) has made a difference for you. Be sure to mention a specific example or anecdote. (Maximum of 500 words.)

18

If you have performed less than satisfactorily in any of your classes please explain the circumstances. (Maximum of 500 words.)

Checklist

I have included the following:

- Responses to items 13-18 (on separate paper)
- References 1-3 (at least from 2 faculty)
- Official Transcript
- Resume
- List of Fall 2008 and Spring 2009 courses (on separate paper)

Mail application with all information requested to:
 Monica Orta
 MIT Summer Research Program
 Office of the Dean for Graduate Education
 Massachusetts Institute of Technology
 77 Massachusetts Avenue, 3-138
 Cambridge, MA 02139-4307

Your application will not be considered complete until all items listed above are received.

- MIT is a member of the National Science Foundation supported Northeast Alliance for Graduate Education and the Professoriate (AGEP) Program and therefore has the ability to increase your opportunities for summer research and/or graduate school by forwarding your application information to several other Research Institutions (Boston University, Pennsylvania State University, Rutgers University and University of Massachusetts at Amherst) . If you would like to be considered for programs at these or other Institutions, please check the box next to this statement.

Applicant's Signature: _____

Date: _____

FACULTY EVALUATION FORM

TO BE COMPLETED BY APPLICANT

Name: _____
First Middle Last

Email: _____ Telephone: () _____

Under the Family Educational Rights and Privacy Act of 1974, a student participating in the Massachusetts Institute of Technology Summer Research Program (MSRP) has access to his or her program file. The MSRP wishes to comply with this law, while still allowing the student to waive the right to access. If you wish to waive the right to examine this evaluation at a later date, please sign here.

Applicant's Signature: _____ Date _____

TO BE COMPLETED BY EVALUATOR

An application for admission to MSRP requires evaluations from two faculty members who are capable of judging the professional and academic promise of the applicant.

Please return this evaluation in a **sealed envelope**, with your **signature written across the seal**, in time for the applicant to meet the following deadline: **February 1, 2009. The evaluation should be returned to the following addressee:**

Monica Orta
 MIT Summer Research Program
 Massachusetts Institute of Technology
 77 Massachusetts Avenue, 3-138
 Cambridge, MA 02139

(Please Print or Type)

Evaluator's Name: _____ Title: _____

Address: _____
(College/University, Office and Street Address)

City _____ State _____ Zip _____

Telephone: _____ Email: _____

In what capacity do you know the applicant? _____ How long have you known the applicant? _____

How does this applicant compare with his or her peer group in academic ability?

| | | | | | | |
|---|---|---|--|---|--|--|
| <input type="checkbox"/> Truly exceptional <small>Equivalent to the best you have known - a person who, in your experience, appears only every few years</small> | <input type="checkbox"/> Outstanding <small>Comparable to the best student in your current class</small> | <input type="checkbox"/> Well above average <small>Top 25%</small> | <input type="checkbox"/> Above average <small>Demonstrated high ability</small> | <input type="checkbox"/> Average <small>Able to complete the program</small> | <input type="checkbox"/> Below average <small>Lower 50%</small> | <input type="checkbox"/> Inadequate opportunity to observe |
|---|---|---|--|---|--|--|

How does this applicant compare with his or her peer group in the ability to work with others?

| | | | | | | |
|---|---|---|--|---|--|--|
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|---|---|---|--|---|--|--|

Signature: _____ Date: _____

EVALUATION OF THE APPLICANT

Please provide a written evaluation of the applicant. It will be helpful if you can include your thoughts about any or all of the following points: What particularly qualifies this student to participate in MSRP; Information about accomplishments in research or independent projects; Characteristics the student displays related to his or her academic/personal goals and activities. Comparison of this student to other students you may know of that have participated in the program. **(You may attach your comments on letterhead.)**

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First

Middle

Last

Email:

Telephone: ()

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- | | | | | | | |
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- | | | | | | | |
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