

STARS INFORMATION SHEET

PERSONAL INFORMATION

First Name _____

Last Name _____

Rocket Number _____ Social Security Number _____

Address you would like your stipend sent to:

Phone _____ Alternate Phone _____

Email _____ Alternate Email _____

College _____ Major _____

Academic Advisor _____

ABOUT YOUR RESEARCH and FACULTY ADVISOR

Faculty Advisor _____ Department _____

His/Her Email _____ Phone _____

Have you met with your Faculty Research Advisor: yes _____ no _____

If yes, has your role in the research been identified: yes _____ no _____

Explain your role:

CAREER GOALS

Briefly explain your career goals, including educational milestones and goals:

What workshops could the STARS program provide to help you with your stated career, research or personal goals?

