

MU Sinclair School of Nursing
Ann Crowe Essig Undergraduate Nursing Research Mentorship Program

Application Form

Submit to: Dr. Robin Harris harrisrc@missouri.edu

Student Research Participant:

Name:

Student Number:

Preferred Email Address:

Local Address:

Phone Number:

Home Address:

Educational Level (semester): 5th 5th 6th 7th 8th Accelerated RN-BSN

Cumulative GPA:

Nursing GPA:

Personal Essay: Please include a 250 word essay describing the following:

- (a) Personal goal you wish to achieve in participating in the overall research process; and
- (b) A brief description of how the proposed researcher's project/research topic aligns with your personal/professional goals.

[INSERT ESSAY RESPONSE HERE]

References:

Include a list of two faculty references who would be able to attest to your following attributes: Motivation, ability to work independently, verbal and written skills, professionalism, reliability, critical thinking ability, and ability to apply nursing knowledge.

[LIST FACULTY REFERENCES HERE]

1.

2.

Please read and sign below. As an Essig program participant I commit to:

- 1. Working at least twenty hours per week for work on this project over the summer session.
- 2. Develop a time table with the nurse researcher you will be working with to identify objectives and deliverables to be completed by the end of the summer session.
- 3. Submit a summary of the project and the student's role and activities during the learning experience by August 15th.
- 4. Prepare a poster or oral presentation at the end of the academic year (spring term-after Essig participation) that will explain the purpose of the project and the progress that was made.

Signature of Proposed Student Researcher: _____

Date: _____