

**Application of Intent for Research Distinction Track  
Surgery/Interdepartmental Medicine 800A**



**Name:**

**Date:**

Local Address:

Phone/Cell No.:

e-mail:

Class:

Pager:

Soc. Sec. No. :

Student EIN:

Ethnic Classification (check one):

- American Indian or Alaska Native
- Asian
- Hispanic
- Other (specify):

- Native Hawaiian or other Pacific Islander
- Black or African American
- White

EDUCATION (list institution, degree earned, date received, and major/minor)

Previous Research Experience (if any, use back of page if necessary):

Research Interests (list field and/or techniques):

1)

2) \_\_\_\_\_

3) \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_