



IINSPIRE LSAMP—DMACC  
Undergraduate Research Project Information



Students receiving IINSPIRE LSAMP funds must completely fill out and submit the following form. Working on undergraduate research projects with a faculty member/mentor entails a commitment from both the faculty member/mentor and the student. To ensure each faculty-student pair is operating under mutually similar expectations from their specific program, we ask that students take a moment with their advisor and provide us with the following information. Contact Dr. Kari Hensen ([kahensen@dmacc.edu](mailto:kahensen@dmacc.edu)), DMACC LSAMP Campus Director, for more information.

Please be sure to review the IINSPIRE LSAMP student expectations listed on our website, [www.iinspirelsamp.iastate.edu](http://www.iinspirelsamp.iastate.edu). All students are required to fulfill these commitments and/or meet these obligations to receive continued funding. Submission of application does not guarantee funding.

Student Name: \_\_\_\_\_ DMACC ID# \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address \_\_\_\_\_ Address: \_\_\_\_\_

(Where you want stipend checks mailed during research experience)

Date of Graduation from DMACC: \_\_\_\_\_

Project Title: \_\_\_\_\_

**Project Description:**

*Provide a description of the project.*

**Is the project ongoing or new?** Ongoing \_\_\_\_ New \_\_\_\_

**Research Project Job Responsibilities:**

*Provide a list of the student's responsibilities associated with the research project.*

**Funding Period**

*Indicate which semester(s) the research funding support will cover.*

- Summer       Academic Year       Fall semester Only       Spring semester only

**Anticipated hourly rate of pay or total stipend the student will be paid:** \_\_\_\_\_

\*General rate \$10.00 per hour

**Expected number of hours per week the student will work on the project:** \_\_\_\_\_

*During the academic year, we suggest student work between 5-10 hours/week.*

### Other Funding Support

Please list any other sources of funding that support the student's research experience (mentor contribution, industry contribution, through other research programs, etc.) and the amount of the support.

Estimated number of times the student will meet with their research mentor during the semester: \_\_\_\_\_

### End of Project Reporting Requirements (check all that apply)

Students are required to fulfill one of the requirements below as part of their participation in the IINSPIRE LSAMP Program.

- Written report       Poster Presentation       Oral Presentation       Web page  
 Other, please specify:

### Standing Commitments

Are there any standing scheduled events (group meetings, presentations, etc.) the student is expected to participate in during the semester, and if so, what are they?

Are you a US Citizen or Permanent Resident?     Yes     No

Gender     Male     Female     Other     Prefer not to respond

Ethnicity     Hispanic or Latino     NOT Hispanic or Latino

Race (please check all that apply)     Black or African American     Hispanic or Latino     Native American     Alaskan Native  
 Native Hawaiian/Pacific Islander     Asian     Caucasian     Other \_\_\_\_\_

I verify that the information I have provided on this form is accurate and complete to the best of my ability.

\_\_\_\_\_  
**Student's Name**  
*(Please print)*

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

### Research Mentor Section

\_\_\_\_\_  
**Mentor/Faculty Advisor's Name**  
*(Please print)*

\_\_\_\_\_  
**Mentor/Faculty Advisor's Signature**

\_\_\_\_\_  
**College/University/Site Name**

\_\_\_\_\_  
**Date**

**Mentor/Faculty Email Address:** \_\_\_\_\_ **Mentor/Faculty Phone Number:** \_\_\_\_\_