



VANDERBILT UNIVERSITY
Office of the UNIVERSITY REGISTRAR

Summer 2018 — Undergraduate Research Program Application

To be completed by the student:

Last Name First Name Middle Name

Address SSN Phone

Email Cell Phone Birth Date Birth Place

Citizenship If not a U.S. citizen, list VISA type Sex (M or F)

Have you ever **applied** to Vanderbilt University before? (check one) YES NO If yes, when? _____

Have you ever **attended** to Vanderbilt University before? (check one) YES NO If yes, when? _____

****Have you ever been suspended or expelled from a school?** (check one) YES NO

****Have you ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime?** (check one) YES NO

[Note that you are not required to answer "yes" to this question, or provide an explanation, if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered by a court to be kept confidential.]

**If you answered "yes" to either or both questions, please attach a separate sheet of paper that gives the approximate date of each incident, explains the circumstances, and reflects on what you learned from the experience.


Are you Hispanic / Latino? No Yes

What is your race?

_____ American Indian / Alaska Native _____ Asian _____ Black / African American

_____ Native Hawaiian / Oth Pacific Island _____ White _____ Two or more races

I hereby agree to be bound by all policies, procedures, and regulations of Vanderbilt University, both those presently existing and those subsequently amended or adopted, including the Honor System. I certify that all information submitted in the admission process is my own work, factually true, and honestly presented. If I provide false information, I understand that I may be subject to a range of possible disciplinary actions, including admission revocation, expulsion, or revocation of course credit, grades, and degree.

 **Student Signature:** _____ **Date:** _____

To be completed by the Vanderbilt Research Program official admitting the above student:

Vanderbilt Program: _____

Approved by (print/sign): _____ **Date:** _____

School official: Please return approved application to:

Vanderbilt University Office of the University Registrar
PMB 407701 / 110 21st Avenue South, Suite 110
Nashville, TN 37240-7701
FAX 615-343-7709

*Do not email this document if FERPA protected information included (SSN for example)
Questions? Email urorecords@vanderbilt.edu*