

Grambling State University

Grambling, Louisiana 71245

REASEARCH INITIATIVE FOR SCIENTIFIC ENHANCEMENT (RISE) PROGRAM
A SCIENCE EDUCATION PARTNERSHIP WITH THE NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

Campus Box 4211 Phone: (318) 274-2348/2446 E-mail: ifeanyif@gram.edu Fax: (318) 274-3741

RISE APPLICATION FORM Academic Year 2012-2013

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ner Internships/Coop Institution			
	Period: Fr	romTo	
List below the two persons you have asked in summer research internships, one of you			
1. Name Dept	Address:		
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2. Name Dept			
	Telephone: ()		
Immediate plans after graduation from G	rambling:		
Ph.DMD/Ph.D MSPharmD	PharmD/Ph.DM.D Post Baccal. ProgWo	rk	
Ph.DMD/Ph.D	PharmD/Ph.D M.D Wo Wo when do you plan to attend graduate	rk e or professional sch	
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Personal Statement

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l cer unde	cation tify that, to the best of my knowledge erstand that any inaccurate or misles further consideration of this application	ading information or omission	will be caue e for disquatifica		
Nai	me (Please Print)	Signature	Date		
Chec	klist for application package:				
A.	Completed, signed application (All questions must be answered).				
В.	Two completed rating folms. Evaluators must sig} c[mpleted rati} g forms a} d place th^m in envelopes. Envelopes sh[uld be sea ed ana sign^d b^ th^ evaluator on th^ back flaptivevaluators { ay se} d recommendations directly to the RISE Office to expedite action.				
C.	Up-to-date offi&ial transcrapts from all coll^ges/universities attendeå. V@ transcri] ts must be receaved in a sealed envelope. Registrar's Office may send transcripts directly to RISE Office.				

MAILING INSTRUCTIONS

Please send the application package to:

Felix Ifeanyi, Ph.D. Professor/Head Dept.of Biological Sciences Director, RISE Program Campus Box 4211 Grambling State University Grambling, LA 71245