Frank Batten College of Engineering and Technology  
Research Experience for Undergraduates  
Application  
(Submit original and one copy to Dean’s Office)

| Student Application: ___________________________ | UIN: __________ |
| Undergraduate Program: _________________________ | GPA: __________ |
| Email: ____________________ | Signature: __________ | Date: __________ |

Are you interested in graduate school at ODU? (Yes/No)________

Are you enrolled in an accelerated BS/ME, BS/MS or ET/MD program? (Yes/No)________

Title of research proposal: _____________________________________________

Start and End Date of Research: ________________________________________

Faculty Supervisor: __________________________________________________

Certification by Department Chair or Chief Department Advisor

I certify that the above-mentioned student is scheduled to graduate within 24 months.

Chair/Advisor Name: ____________ | Signature: ____________ | Date: ____________

Endorsement by Faculty Supervisor

Name: ____________________ | Signature: ____________________ | Date: ____________

Optional Budgetary Commitment by Faculty Supervisor

Amount (not to exceed $500): ____________ | ODURF Project number: ____________

Name: ____________________ | Signature: ____________________ | Date: ____________

Dean’s Decision

Approve/Deny: ____________ | Signature: ____________ | Date: ____________

Attach a summary description of the research project not to exceed one typed page.