



Student Eligibility Form - To be completed by the nominated student.

Fill out your information below:					
Student Name:					
OSU Email Address:					
College of Engineering Maj	or / Pre-Major:				
Fill out information from your facu	ılty advisor below:				
Faculty Advisor Name:					
OSU Email Address:					
Answer the following questions:					
Would this be your first research experience at Ohio State? OYes				ONo	
If No, please describe your pre-	vious experience including nsibilities, and the faculty a	-		ch work, your role and	
respon	isionices, and the lacarty t	autisor or your	project.		
	1.1//				
Are you currently fully funded / "maxed out" on Financial Aid for the 2023 - 2024 academic year?			\bigcirc No	○ I don't know	
What other potential sources of	Vhat other potential sources of ○ COE URS (from proposal submission) ○ SROP				
scholarship have you applied for	, ,,				
related to research?	Other(s):				
Please read the following stateme	nt and sign below.				
"By signing below, I verify that I am			_	_	
Summer Research Program and cor	•	•			
selected to participate in this progreducation. I understand that the re			•		
from May 13 to July 19 or I will esta	•	•	•	•	
perform my research on campus, I		•			
I understand that, if selected, I mus	st meet the following crite	ria to receive r	nv scholars	hip: a) maintain	
satisfactory progress on my research					
and the College of Engineering, and					
Undergraduate Research Office Fal	l Research Festival. If I do	not meet thes	e criteria, I	understand that my	
scholarship may be revoked.					
I have written and attached a 1-2 p	page abstract describing m	y project. It ir	ncludes a su	ımmary of the overall	
goals of the research project and t responsible."	he specific objectives and	aspects of the	project fo	r which I will be	
Student Approval					
Signature of Nominated Student				 Date	