**AVC Summer Research & Leadership Program**

**Application/Agreement Form**

**May - August 2024**

**Section 1 (Student Completes)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **AVC SRLP Student Responsibilities:**  I agree to…   * attend mandatory in-person SRLP seminars. For any absences I must get permission from my supervisor and SRLP Coordinators. This applies even if I am taking the SRLP a second time. If my project involves biohazards, I understand I must be current on biosafety training and will need to be added to my supervisor’s biosafety permit. * meet at least once a week, or more often as needed, with my supervisor to discuss the project. * conduct full time research with my faculty supervisor over a 12-week period (or more). * present a 5-minute presentation to fellow students describing my research project early in the summer. * prepare a research abstract. * produce a scientific poster and present a brief project summary presentation at the AVC SRLP Student Project Sessions held in late August or early September. | | | | |
| **UPEI STUDENT ID #:** | **STUDENT NAME:** | | |  |
|  |  | | | |
| **INSTITUTION OR FACULTY ENROLLED IN:** | | | **DEGREE AND YEAR:** |  |
|  | | |  | |
| **HOME PHONE #:** | **CELL PHONE #:** | **EMAIL ADDRESS:** | | |
|  |  |  | | |
| **STUDENT SIGNATURE: (By signing this form, I agree to the AVC SRLP Student Responsibilities)** | | | | |
| X | | | | |

**Section 2 (Supervisor Completes)**

|  |  |
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| **AVC SRLP Faculty Responsibilities:**  I agree to…   * allow my student to attend mandatory in-person SRLP seminars. For any absences by student must get permission from myself and SRLP Coordinators. This applies even if my student is taking the SRLP for a second time. Students working with biohazards cannot miss the biosafety training session and must be added to your biosafety permit. * meet at least once a week, or mor often as needed, with my student to provide guidance and resources necessary for a positive summer student research experience. * assist the student in preparation of a research abstract, poster and brief summary presentation describing the summer research project. | |
| **SUPERVISOR NAME:** | **DEPARTMENT:** |
|  |  |
| **PROJECT TITLE:** | |
|  | |
| **SUPERVISOR(S) SIGNATURE(S): (By signing this form, I agree to the AVC SRLP Faculty Responsibilities)** | |
| X | |

**Student and faculty should keep a copy of this agreement for your records.**

**Submit to:** Sherri Pineau - AVC Graduate Studies and Research, Room 2309 (email: [scpineau@upei.ca](mailto:scpineau@upei.ca))

**Deadline:** Thursday, April 18, 2024, by 12:00 p.m.