Arts & Sciences Program for Independent Research Application Cover Sheet Summer 2025

Student Researcher		
Name	Student ID	Year
Phone	Email	Overall GPA
Hometown	Career goals	Major GPA
Title of Project		
Dates in residence if project is approved (six weeks minimum): (Put a date in the month the project will start and a date in the month the project will end) June; July; August		
•	gust 15, 2025. I will notify the	e at Samford*. <mark>I agree to provide a final</mark> e Associate Dean if my availability
Signed	Date	
description of how the w	vork will be done and how the	ot be completed in residence. Please give a mentoring will be accomplished.
Faculty Member		
Name	Department	
Q	le to mentor the above student e student's ability to complete	t. We have discussed the proposed project, the task on schedule.
Signed	Date	
Department Chair Our department support	s this student working with the	e faculty member designated above.
Signed	Date	