

U.F. Center for Gender, Sexualities, and Women's
Studies Research
200 Ustler Hall
P.O. Box 117352
Gainesville, FL 32611-7352

Phone: 352-392-3365
Fax: 352-392-4873

**UNDERGRADUATE RESEARCH APPLICATION
WST4911**

Student Name: _____

UF ID: _____ Email _____ Phone _____

Proposed Research Semester: Fall ___ Spring ___ Summer ___ 20___ Credits (0-3) ___

Briefly describe the scholarly content* of your undergraduate research and explain how it is worthy of academic credit. *E.g., I expect to spend 5 hours/week on data collection and analysis. In addition, I will read at least 8 academic articles and write a 4 page literature review.

Research Supervisor: _____ Email: _____ Phone: _____

Signature (Research Supervisor)

Date

Signature (CGSWSR Undergraduate Coordinator)

Date

Return this signed application to 201 Ustler Hall for registration purposes.