

**Undergraduate Research Incentive Program (URIP) Faculty Application Form**

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**Please Type**

Faculty/Mentor Name \_\_\_\_\_ Department \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_ Major \_\_\_\_\_

(Please note the minimum GPA 3.0 required for participation.)

Student E-Mail \_\_\_\_\_ Class/Year \_\_\_\_\_

Project Title: \_\_\_\_\_

Please provide a brief project description:

Briefly describe how the student will collaborate in the research project. What are the work responsibilities/expectations?

What is the significance and/or outcome/product (paper, presentation, grant) of the research project?

## Hiring Information

SpeedType (Combo Code:) \_\_\_\_\_  
(Sponsored project, Indirect PI, or department match)

Start date \_\_\_\_\_

End date \_\_\_\_\_

Hourly wage \_\_\_\_\_  
(At least minimum wage. Maximum \$16.50)

Hours per week \_\_\_\_\_

Total commitment \_\_\_\_\_  
(Total to be paid from all sources.)

### Additional Information or notes

#### Participation Agreement:

Faculty and student participants will adhere to program guidelines and meet on a regular basis to review research progress and protocol. Students will submit a brief summary report and/or 100-word abstract on their research at the end of each semester.

#### Student employment policies - time approval, payroll enrollment and late pay:

In agreement with student employment policies students are not permitted to work under URIP until fully-enrolled in payroll. The dean's office will be unable to process late pay for students who are permitted to work before fully-enrolled.

Supervisors will be responsible for time approval and processing of any late pay forms. Supervisor responsibilities are available at <https://www.umassd.edu/studentemployment/supervisors/hired/>.

#### When to hire a student:

Since students are not permitted to begin working until fully enrolled in payroll and this can take up to three weeks, program enrollment and hiring should commence as soon research plans are confirmed.

Faculty signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dean or Designee: \_\_\_\_\_ Date: \_\_\_\_\_

E-mail this form to Cindy Costa, [ccosta3@umassd.edu](mailto:ccosta3@umassd.edu).