Non-HMC Student Summer Research Registration Form 2022

Student Name: ________________________________

Phone No.: ____________________ Email Address: ________________________________

College During Academic Yr.: ____________________ Grad Yr.: __________

Emergency Contact:

Name: ____________________ Relationship: __________ Phone No.: __________

Research Period:


If your research period is not listed above, please indicate the research period below:

Research Period Start Date: ___________ Number of Research Weeks: ______

Student Award Amount:

☐ $6000  ☐ Other: $ ______

The standard research period is 10 weeks. If your research period is less than 10 weeks, the stipend will be pro-rated accordingly.

If you are living off campus, please provide an address for your check to be mailed to:

Mailing Address: ________________________________

Student Signature: ____________________ Date: __________

Advisor's Name: ____________________ Advisor's Signature: ____________________

Research Funding Source: ________________________________

Please enter the title of the student researcher’s project:

____________________________________________________

Please return the completed form to Rodrigo Flores at roflores@hmc.edu and acaldera@hmc.edu