A BE CAREFUL WITH THIS FORM					
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enter any sensitive information (passwords, credit card number etc.) in this form. To remove this message, please Deploy the form.					
FAU Max Planck Honors Program Applicant Information					
Last Name	First Name		Date		
FALL 7#					
FAU Z#		FAU Email			
Mailing Address					
City	State		ZIP Code		
College	Major		Expected Graduation		
Are you a National Merit Scholar (Finalist or Semi-finalist)					
Are you a transfer student with an earned AA degree?					
Are you applying to the FAU-MPHP before completing 60 college credits?					
Have you secured a Faculty Sponsor yet? If you select no, skip the next section titled "Faculty Sponsor Information"					
- Faculty Decearch Montor Inform	ation				
Faculty Research Mentor Information					
Important: Each participant in the FAU-MPHP will need to have a faculty research mentor at the start of her/his					
final two years of college. Students applying during the spring semester do not need a faculty research mentor while applying; however, students applying during the fall semester will need to					

already have a faculty research mentor secured. That mentor, typically a neuroscientist, may be from the College of Science, Wilkes Honors College, College of Medicine, or be an FAU affiliate faculty member from the Max Planck Institute for Neuroscience or the UF-Scripps Biomedical Research Institute.

Students must secure their faculty research mentor directly. Each potential mentor will most likely want to interview you and reserves the right to decline serving as your mentor. THEREFORE, PLAN AHEAD! Students seeking to secure a faculty research mentor should contact FAUMPHP@FAU.EDU.

Instructions:				
Please have your faculty re https://www.fau.edu/mphp/		a Faculty Mentor form online at		
Name of Faculty Mentor		College or Institute Affiliation		
Professional Title		Email Address		
Phone Number	Name of Resear	earch Supervisor (if different than Faculty Sponsor)		
Title or General Area of Res	search/Study with Spons	ored Student		
)		
 Letter of Recommendation 	on			
Instructions:				
Please have the faculty me		g you a letter of recommendation (should be it the Faculty Recommendation form or letter online		
Name of Faculty Member		Department Affiliation		
Email Address		Phone Number		
 Application Questions 				
In 250 words or less, how w	vill participating in the F/	AU-MPHP help you acheive your goals?		
In 250 words or less, how will your involvement in the FAU-MPHP benefit the program overall?				
In 250 words or less please	e describe any applicabl	e research training or experience		
In 250 words or less, please describe any applicable research training or experience.				
Please list any current profe	essional/academic mem	berships or honor societies that you belong to:		
Please list any honors and/	or awards you have rece	eived:		

Please list any relevant presentations or publications:

Document Uploads

Please upload an updated unofficial transcript

Please upload a current Resume/CV

If applicable, please upload scientific writing, poster presentation, or publication examples (optional)

If applicable, please upload any relevant certifications (optional)

If applicable, please upload documents supporting National Merit Status (optional)

 With my signature below, I certify that the information I provided is complete and accurate. Should any of this information change prior to entry into the FAU-MPHP, I pledge to immediately notify the program.

Signature

Date

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