Undergraduate Research Assistant Application

Teen StAR Laboratory

Please complete this application and drop it off, along with an updated copy of your CV or resume with Dr. Blumenthal in Terrill Hall 357 or email the documents to TeenSTAR@unt.edu. We will notify you shortly afterward to schedule an initial interview. Please email Dr. Blumenthal (Heidemarie.Blumenthal@unt.edu) or the lab (TeenSTAR@unt.edu) if you have any questions about the application process.

Please indicate which semester you are seeking a position: Fall Spring Summer 20\_\_\_\_\_(year)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year in school:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Anticipated graduation (Month/Year)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cumulative GPA:\_\_\_\_\_\_\_\_\_\_\_ Major GPA:\_\_\_\_\_\_\_\_\_\_\_

E-mail where we can most easily reach you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What are current your post-undergraduate plans?
2. Why do you want to be an undergraduate research assistant for the STAR team?
3. Do you have any relevant experience that you think would be helpful (e.g., research; working with children)? If so, please describe.
4. Do you have any relevant skills that you think would be helpful (e.g., fluency in Spanish, project management)? If so, please describe:
5. How many hours (on average) are you willing to work each week during the semester? \_\_\_\_\_\_\_\_\_\_
6. How many hours (on average) are you willing to work each week during the summer? \_\_\_\_\_\_\_\_\_\_\_
7. How many semesters are you willing/interested in working in our lab? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Are you interested in obtaining credit hours for your work in the lab? YES NO
9. Are you an honors student? YES NO
	1. If YES, do you already have a thesis mentor? YES NO Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Are you currently/do you plan on working in another research lab? YES NO
	1. If YES Laboratory or Faculty name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. If YES how many hours per week do you currently work in your other lab(s)? \_\_\_\_\_\_\_\_\_\_\_
11. Please provide the name and contact information for at least two **professional** references (name and relation to you) who can speak to any of the following: work ethic, professionalism, ability (or potential ability) to serve as a RA, ability to work with children/vulnerable populations:

Name: Relation: E-Mail: Phone#:

Name: Relation: E-Mail: Phone#:

1. We work with minors and need to know that no personnel have a criminal record.
	1. Have you ever been convicted of a misdemeanor or a felony? YES NO
	2. If yes, please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To ensure that we have done our due diligence with respect to hiring new personnel, we will contact at least two references and complete a background check consisting of a Google search for your name and a sex offense registry check. We may also solicit feedback from others in the Psychology department who know you (e.g., current TStAR RA’s, faculty). All personnel are required to have two positive references and no history of criminal offenses.

Do you consent to the background check procedure described above? YES NO

1. Please list all of your prior and current Psychology courses as well as the names of your instructors.

Course Professor Grade (Optional)

1.

2.

3.

4.

5.

6.

7.

**AVAILABILITY (indicate semester and year) Fall Spring Summer Year: 20\_\_\_\_\_\_\_\_**

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Please fill each cell in **GREEN** to indicate all the times that you **are available** and **ORANGE** for times you MAY be available but are unsure about at this time: Example:

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| --- | --- | --- | --- | --- | --- | --- | --- |
|   | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| 8:00 – 8:30 |  |  |  |  |  |  |  |
| 8:30 – 9:00 |  |  |  |  |  |  |  |
| 9:00 – 9:30 |  |  |  |  |  |  |  |
| 9:30 – 10:00 |  |  |  |  |  |  |  |
| 10:00 – 10:30 |  |  |  |  |  |  |  |
| 10:30 – 11:00 |  |  |  |  |  |  |  |
| 11:00 – 11:30 |  |  |  |  |  |  |  |
| 11:30 – 12:00 |  |  |  |  |  |  |  |
| 12:00 – 12:30 |  |  |  |  |  |  |  |
| 12:30 – 1:00 |  |  |  |  |  |  |  |
| 1:00 – 1:30 |  |  |  |  |  |  |  |
| 1:30 – 2:00 |  |  |  |  |  |  |  |
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| 3:30 – 4:00 |  |  |  |  |  |  |  |
| 4:00 – 4:30 |  |  |  |  |  |  |  |
| 4:30 – 5:00 |  |  |  |  |  |  |  |
| 5:00 – 5:30 |  |  |  |  |  |  |  |
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| 6:00 – 6:30 |  |  |  |  |  |  |  |
| 6:30 – 7:00 |  |  |  |  |  |  |  |
| 7:00 – 7:30 |  |  |  |  |  |  |  |
| 7:30 – 8:00 |  |  |  |  |  |  |  |

OPTIONAL

If there are any weaknesses to your application brought on by extenuating circumstances (e.g., poor grades due to health problems) that you would like us to know about, or additional information that you would like us to consider when reviewing your application, you may include that information here: