iBUMP MENTORSHIP APPLICATION

*this application form is in order to identify the best mentee for you, but we cannot guarantee any requests

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CONTACT INFORMATION

FULL NAME   EMAIL ADDRESS

APPLICATION

Which Semester are you applying for?   What graduate program/year are you in?

Total # of years in graduate school.   Whose lab are you in?

Do you have another graduate degree? If so, please list here.

Please summarize your research interests.

Do you have experience applying for and/or receiving scholarships or grants (e.g. scholarships internal to the department, OGS, NSERC)? If so, which?

Do you have any specialized lab, field, or research skills (e.g. PCR, programming, trapping, dichotomous keys)?

Do you have any relevant career/work experience? If so, please elaborate.

Do you care about the gender of your mentee? If yes, please specify.

Do you have a mentee in mind? If so, please list his/her name and email address.

Would you be comfortable having more than 1 mentee this semester?

Would you prefer to have a mentee enrolled in a thesis project?

Have you participated in this program before? If so, who did you mentor?

15.   Please summarize why you want to participate in this program, as well as what you hope to get out of it.

When you have completed this form, kindly email it to ibump.info@gmail.com. Thanks!