

UNDERGRADUATE RESEARCH OPPORTUNITIES PROGRAM (UROP) FACULTY SPONSOR FORM

This form should be completed by the student applicant and a signature obtained from the student's faculty sponsor.

STUDENT APPLICANT:

Name:

Title of project:

FACULTY CONTACT INFORMATION

Name:

Title:

Department:

Email:

By signing below, the professor commits to supervise the student project listed above, and to ensure compliance with all safety and research subject requirements in accordance with university and disciplinary standards.

Signature of Faculty Sponsor:

Date:

Questions? Please contact us via email at <u>honors@ou.edu</u> or visit our website at ou.edu/honors.