## UNIVERSITY OF WASHINGTON SCHOOL OF DENTISTRY

## **SUMMER RESEARCH FELLOWSHIP APPLICATION**

Application: 2025 program

PLEASE SUBMIT THIS APPLICATION VIA E-MAIL TO: SOD Office of Research (dentres@uw.edu)

**DUE DATE: December 6, 2024 11:59 PM** 

1	Student Applicant Information	Name Telephone		
	Address			
	e-mail			
	Prior Degrees	Degree	Field	
		Institution	Date	
	Student ID Number			
2	Preceptor Information	Name	Position	
		Dept.		
		Box #	Telephone	
		e-mail		
3	Title of Proposed Project (Not to exceed 53 typed spaces)			

4	Check One of the Following Statements				
			This application does not include activities involving human subjects.		
			This application includes activities involving human subjects. Our institutional		
			committee reviewed and approved it on		
			(Approval No), in accordance with our assurance approved by		
			the Public Health Service. This project will be subject to continuing review, as		
			provided for in that assurance.		
			This application, which includes activities involving human subjects, is pending		
			review by an institutional committee as provided by our assurance approved by the		
			Public Health Service. Certification of completion of the review will be provided as		
			soon as possible, and prior to the use of	human	subjects.
5	Supplementary Information				
			lonizing radiation		Diving
			Pathogenic Organisms		Other Safety Considerations
			Chemical Carcinogens, Mutagens, Teratogens, Hazardous Chemicals		Use of Laboratory Animals
6	For Animal Use				
	(check one)		This project has been approved on		·
			This certification is pending review by the Division of Animal Medicine. Certification of review will be provided prior to any animal use.		
7	Student Commitment to Training Period & Report	Acceptance of funds entails an obligation to submit a report of activities carried out during the funded period. This report should be in the form of a scientific manuscript prepared for publication, and it should be submitted to The Office of Research at <a href="mailto:dentres@uw.edu">dentres@uw.edu</a> by December 12, 2025 at 5:00 PM. Eleven weeks' FTE training is required, and will be fulfilled as shown in the Project Timetable (Form Page 5). Student is also required to present a poster at Research Day 2026.			
	Approval/Acceptance Signatures				
		Stude	nt Applicant	Prece	eptor
		Depar	tment Chairperson of the Preceptor	involv Chair	ere more than one department is wed, provide signature from rperson of department in which work e done).

	ir .		
8	Preceptor's Description		
	Description of expected research learning experience to be provided for student (to be completed by preceptor)		
	Preceptor's Assurance	I take responsibility to assure that the studen described herein.	nt is provided the research opportunity
		Preceptor	Date
9	Budget Information		
	Will this project require funds for supplies, equipment, local travel, publication costs, xerox, telephone costs, subject participation payments, or other costs? Up to \$500 may be requested. Please itemize and show total funds requested. All items requested should be research-related (ex: costs for traveling from home to your place of work may not be requested, but costs of traveling between different research locations are allowable expenses).		
			Total Requested \$

10	Elective Credit	Six (6) elective credits can be obtained in the Summer Quarter 2025 for completion of the Program requirements. These elective credits are offered in the Preceptor's department, and the Preceptor serves as the Course Director.  Attendance at a weekly Research Methods seminar (DENTEL 530) is expected of all students; participation in this seminar carries one (1) elective credit in Spring Quarter 2025.  I wish to receive elective credit for the Research Methods seminar  I wish to receive elective credit for my Research project.		
		Student's Signature		
		☐ I agree to serve as Course Director for the student's elective		
		Preceptor's Signature		
11	Project Description	Please provide a description of the proposed research project (6 PAGES). You should include:		
		Summary of proposed project (not to exceed 200 words).		
		2. An introduction containing a review of published literature and other observations which serve as the basis for the project.		
		3. A statement of rationale and research objectives for the project.		
		4. A description of the experimental protocols to be carried out.		
		<ol> <li>An explanation of how the data will be managed and processed, including statistical analysis where appropriate.</li> </ol>		
		<ol> <li>A statement of the significance of the work relative to the knowledge in that general area.</li> </ol>		
		7. Bibliography with citations for referenced items.		
		The research proposal should not be more than a maximum of <b>6 pages</b> , double-spaced typing. It should include sufficient detail for satisfactory review by the Research Advisory Committee of the School of Dentistry.		

## PROJECT TIMETABLE (TO BE COMPLETED BY ALL STUDENTS)

Complete the table below showing what activities you plan to undertake during each period. List activities sequentially and be as specific as possible. Add bullets as necessary.

Time Period	Project Activities	# Weeks	% Effort (Student)	Weeks of FTE Effort (# Weeks x % Effort)
03/17/25-3/21/25		1	100%	1.0
03/24/25-05/23/25	Research Methods Seminar	9	11%	1.0
05/26/25-07/04/25		6	10%	0.6
07/07/25-08/29/25		7	100%	7.0
09/01/25-12/05/25		14	10%	1.4

TOTAL = 11.0 WEEKS