



# MARC

Minority Access to Research Careers

COLLEGE OF NATURAL SCIENCES  
UNIVERSITY OF PUERTO RICO  
RIO PIEDRAS

## MARC Application Form

Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
(DD/MM/YY)

Social Security Number: \_\_\_\_\_ Student Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail \_\_\_\_\_  
(where you can be reached)

Mayor:

Biology  Chemistry  
 Undecided  Other (Specify) \_\_\_\_\_

Education:

1. High School \_\_\_\_\_ 20\_\_ to 20\_\_

2. University \_\_\_\_\_ 20\_\_ to 20\_\_

Experiences:

1 ¿Have you participated in a Science Fair during High School?  
 Yes  No

If yes, please describe briefly your project. Specify if any honorable mention, medals or any other award was received.

2. Describe your laboratory experiences, or any regular laboratory course that you think is relevant.

**Future Plans:**

1. Mention the science courses that you plan to take before graduating.
  
2. Describe your goals and objectives.
  
3. Why you are interested in participating in the MARC Program? Describe how you think it will help you to establish your goals.

**Professors to whom you requested a letter of recommendation:**

1. \_\_\_\_\_  
Name
  
2. \_\_\_\_\_  
Name
  
3. \_\_\_\_\_  
Name

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return to: MARC Program Office  
Facundo Bueso Bldg. 3<sup>rd</sup> Floor  
University of Puerto Rico  
Río Piedras Campus  
Tel. 764-0000, X-4752

**NOTE: Applications that are not in the Office at the deadline date will not be considered for evaluation.**