

CERTIFICATE IN NEUROSCIENCE ENROLLMENT FORM

PERSONAL & CONTACT INFORMATION

Name	Student Number	Email	
Address	City	State	Zip code
Major	No. of Major Hours Completed	Current GPA in Major	Today's Date
Expected Date of Graduation	Expected Date of Completion of Certificate		

The certificate requires completion of a Directed Research Assistantship with a [Neuroscience faculty member](#) within any of the participating departments. It is expected that your research will lead to a presentation of the research (e.g., at the UMSL Neuroscience Showcase or the Undergraduate Research Symposium). By signing below, the research mentor indicates a willingness to support the above student through the research requirement of the certificate.

Mentor Name	Mentor Signature	Today's Date
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