Healing Lab

Research Assistant Application Advisor: Dr. Tsotsoros Department of Human Development and Family Science University of Rhode Island

Instructions: Please complete this application a CC' healinglab@uri.edu) along wi		ina Tavares via email (karina_tavares@uri.edu and y of your transcript.	
Date:			
Name:			
Address:			
Phone:	Email:		
Major:	GPA:	Major GPA:	
Semesters completed:	Expected graduation date:		
How many semesters can ye	ou commit to thi	s position?	\
Will you be a registered stud	lent during the s	summer? (double click box to check)	
Will you be available to work YES ☐ NO ☐	in the lab durin	g the summer?	
Computer Background: Plea languages that you have experien		operating systems/ software/ programming	
☐ MS Word ☐ PC☐ MS Powerpoint ☐ Ma	C Windows ac	☐ SPSS ☐ Redcap	
Other:			
\			

What are you	r plans after gra	duation?		

Are you applying to work in the lab to get: Please check all that apply to you.	
☐ Credit?	
☐ A recommendation letter?	
☐ Experience?	
Other? Describe:	
Utilet? Describe.	
Utilet? Describe.	

Please block out times that you know you *cannot* work. Semester & Year:_____

	Mon	Tues	Wed	Thurs	Fri	Sat
8:00 AM						
8:30						
9:00						
9:30						
10:00						
10:30						
11:00						
11:30						
NOON						
12:30						
1:00						
1:30						
2:00						
2:30						
3:00						
3:30						
4:00						
4:30						
5:00						
5:30						
6:00						
6:30						
7:00						
7:30						