## **CITL Undergraduate Student Research Experience Application**

Faculty and student, please complete application together.
Faculty name:
Desired semester to work with student (please indicate sem/yr): fall spring summer
Will the student be exposed to human or animal subjects?  □ Yes, please explain: □ No
Briefly describe your project and what you and the student will accomplish:
Do you have a current or former student researcher in mind?  No, but I am interested in help from CITL to match a student for the research.  If yes, please provide the following student information:
□ Name BUID# BU email
School(s) and Year(s), ex: CGS '18, COM '20 Intended major
Do you have a work study award and if so, what is the award amount?Students cannot exceed 20 hrs/wk combined hours for work study and other BU jobs; initial here to acknowledge
Is the student an international student? Verify with student, additional time and paperwork may be required.  □ No □ Yes
Has the student applied for <u>UROP</u> funding for the semester?  □ No
<ul> <li>□ If Yes, amount of UROP Award requested: \$</li> <li>□ Attach a copy of the submitted UROP application to this form</li> </ul>
☐ If Faculty Matching Grant requested please indicate amount of CITL funding \$

### **Next Steps and Important Information**

- BU ID is necessary to verify if I-9 and W-4 are needed. IF <u>I-9</u> and <u>W-4</u> are needed we will inform the student; **original documentation** from the <u>I-9 List of Acceptable documents</u> will be required, please plan ahead.
- Faculty and student must both sign <u>FERPA Non-Disclosure Agreement</u> and <u>Student Employment Confidentiality Policy</u> agreement (page 2-3 of this document).
- Complete the necessary forms outlined above, and return along with this completed form to CGS room 215. This
  must be hand-delivered, as CITL is not allowed to accept electronic employment forms. Once all required
  paperwork is received, research may begin.
- **Students please note**: At the end of the semester, a thank you note to the donor and a brief project summary is required. CITL will provide students with examples.
- Faculty please note: CITL Undergrad Researchers must conduct approximately 8-10 hours of research per week. Please inform CITL if there are issues with students not completing the work since weekly payments can be stopped for non-work. At the end of the semester, a faculty summary is required. Student check-ins during the semester are encouraged.
- The student stipend is \$2000 and will be paid weekly over the course of the semester. Students commit to an end of semester summary and thank you to the donor. Students are encouraged to sign up for <u>direct deposit</u> via the Student Employment Office website. Otherwise physical checks must be picked up at 881 Commonwealth Avenue, 2<sup>nd</sup> floor at the First Point desk.

# Family Educational Rights and Privacy Act (FERPA)

# **Non-Disclosure Agreement**

The Family Educational Rights and Privacy Act (FERPA) is a federal law enacted in 1974 that guarantees the confidentiality of a student's records. As a student or casual employee of Boston University, it is important for you to familiarize yourself with some of the basic provisions of FERPA to ensure that you do not violate this federal law.

Unless your position specifically requires it, you may not disclose information about a student to anyone. To do so is a violation of federal law. Unauthorized disclosure would result in penalties up to and including the loss of your job and sanctions by the Office of Judicial Services. Even a seemingly minor disclosure of information, such as telling another student of someone's class schedule, is a violation and would result in punitive action.

I have read and understand my employee responsibilities as stated under the	Family
Educational Rights and Privacy Act Non-Disclosure Agreement.	

Student/Casual Employee Name (Print)	B.U.I.D.
Student/Casual Employee Signature	Date
Supervisor	Date
Seogn/Web/WorkStudyForms/FerpaAgreement.doc	

For more information on the University FERPA policy, log onto the Registrar's Office homepage, www.bu.edu/reg, and go to General Information.

#### STUDENT EMPLOYMENT CONFIDENTIALITY POLICY

As a student employee at Boston University, you play an important role in assisting in the operation of the institution and contributing to the success of your fellow students, faculty, and staff.

All student employees are required to adhere to the confidentiality policies that govern information acquired through their employment. This information may include, but is not limited to, student, faculty and staff personnel, financial or academic records; faculty teaching and research; and, University business information and internal communications, which includes conversations related to office and University operations. Both you and the office or department for which you work are obligated to protect the confidentiality of this information, and you may not reproduce, disseminate or disclose its contents in any way.

All student employees are required to maintain the confidentiality of all information acquired through their employment. In addition, those student employees whose positions might, at any time, expose them to *student* records or information will also be required to read and sign the <u>Family Educational Rights and</u> Privacy Act (FERPA) Non-Disclosure Agreement and return it to their supervisor.

**Supervisor Signature** 

## BU Supports Equal Opportunities for All Students

BU's statement on diversity includes the following: "We strive to create environments for learning, working, and living that are enriched by racial, ethnic, and cultural diversity. We seek to cultivate an atmosphere of respect for individual differences in life experience, sexual orientation, and religious belief, and we aspire to be free of intellectual parochialism, barriers to access, and ethnocentrism."

In order to ensure that CITL and CGS are fulfilling this aim, we would appreciate it if you would complete the following for our records. **Your name will not be associated with this information**. Please check any that apply to you.

Race a	nd Ethnicity
	Hispanic or Latino/a/x American Indian or Alaskan Native Asian Black or African American Native Hawaiian White
Do you	ı have a disability?
	Yes No
Do you	a receive a Pell Grant to attend BU?
_	Yes No
Do you	a have work study at BU?
	Yes No
Are yo	ou a first-generation student?
	Yes No