

Information Document

Please read [Research Handbook](#) then send completed Information Document to ahourani@bu.edu or gsdmr@bu.edu.

Visit pre-doctoral research office W201D or call (617) 358-9693

Name:

Research Dates: From: To:

Class: ☐ DMD ☐ AS ☐ Other Graduation date

Rotation: ☐ Year I 2x3 ☐ Apex IREC1 ☐ IREC2 ☐ IREC3 ☐ Other

BU ID #:

BU e-mail:

Tel #:

Citizenship: ☐ US citizen ☐ Green card holder ☐ Non-US citizen nationality

Prior Institution:
Degree:

Graduation Year:
Major:

Research area of interest: 1.
Please list four 2.
 3.
 4.

Days available:

Hours/week:

Preference of mentors: 1.
Please list four 2.
 3.
 4.

Preliminary Pre-doctoral Survey

I. Background Information

Ethnicity:

- ☐ African American/Black
- ☐ Caucasian
- ☐ Native American
- ☐ Asian/Pacific Islander
- ☐ Latino/Latina
- ☐ Other

II. Research Relevant Experience

1. Did you have research experience prior to your enrollment in the Dental School?

- ☐ Yes ☐ No

2. Describe your research experience:

Tasks

Research question (hypothesis)

Time spent: months/hours per week

How did you get involved

3. Are you planning to participate in the following meetings?

- | | | | |
|---------------------------|------------------------------|-----------------------------|------------------------------------|
| SDM Science Day | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Undecided |
| AADR/IADR | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Undecided |
| Yankee Dental Congress | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Undecided |
| Hinman Symposium | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Undecided |
| Other scientific meetings | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Undecided |

4. Are you planning to be a member of the Student Research Group (SRG)?

- ☐ Yes ☐ No

5. If the program were successful in giving you the experience you hoped to get what that would be?

III. Future Plans

1. What are your plans after graduation? Check one.

- ☐ Research
- ☐ Post-doc
- ☐ Teaching
- ☐ Clinical practice
- ☐ Undecided

2. When do you plan to be involved in research activities? Check one.

- ☐ Immediately after graduation
- ☐ 2-3 years after graduation
- ☐ 4-6 years after graduation
- ☐ No plans at this time

3. If you are not considering research in your future plans, why?