

Neuroscience Program Form  
Faculty Agreement

I understand that by accepting this Neuroscience student; \_\_\_\_\_, into my laboratory, I am committing to train this student per the Policies and Procedures as outlined by the Neuroscience Program. I understand that I will allow our Neuroscience students to participate in the program by attending the monthly seminars, student retreat, journal clubs, Snowbird Symposium, Annual Brain Awareness Week, student symposium and help during the annual recruiting effort, and as their mentor I will make time for them to fulfill these required activities. I also understand that I am agreeing to adhere to the financial policy of the program by paying the stipend amount set by the Neuroscience Program and by increasing stipends in step with the Neuroscience Program. I will also cover the student's health and dental insurance as long as it is a criterion of the Neuroscience Program.

The student has completed the following core courses:

- \_\_\_ NEUSC 6040: Cellular and Molecular Neuroscience
- \_\_\_ NEUSC 6050: Systems in Neuroscience
- \_\_\_ NEUSC 6060: Neuroanatomy
- \_\_\_ NEUSC 7750: Developmental Neurobiology
- \_\_\_ NEUSC 6900 Rotations (4):

\_\_\_ Because the above named student entered the program with a masters degree, the student is only eligible for the Tuition Benefit Program through the Graduate School for 4 years. The department or laboratory will be required to pay tuition for any student who requires more than 4 years to complete their Ph.D. (approximately \$1700/semester once eligibility expires).

\_\_\_ Because the above named student's GPA is below a 3.0, they are not eligible for the Tuition Benefit Program through the Graduate School. This results in the department or laboratory paying the tuition for the student until they can raise their GPA above a 3.0.

\_\_\_ Because the above named student failed one or more of the core courses, they will have one more chance to take the course(s). If they fail the course a second time, the student will be dismissed from the Neuroscience Program.

\_\_\_ Because the PI has not previously mentored a Ph.D. student, \_\_\_\_\_ will serve as co-mentor.

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

I understand the information above is correct

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

I agree to accept this student in my lab to conduct Ph.D. dissertation research. I also agree to financially support the student as long as the student is in good standing in accordance with the Graduate School guidelines and the sponsoring department's standards. My funding sources and dates of support for this student are: \_\_\_\_\_

# of neuroscience students presently in the lab: \_\_\_\_\_

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

The Department of \_\_\_\_\_ will provide stipend support for the student above if the mentor loses funding.

Approval of Neuroscience Program student advisor: \_\_\_\_\_ Date \_\_\_\_\_