Undergraduate Research Assistant Information Sheet
Dr. Kimball’s Human Learning and Memory Lab

Semester ________
Dr. Kimball’s Human Learning and Memory Lab
Year ________

Name ________________________________  Student ID: __________________________

Major: ________________________  Status (circle one):  Freshman  Sophomore  Junior  Senior

Email: ________________________________________________________________________

Phone: Home___________________ Cell ___________________ Other ___________________

Why are you interested in working in the lab? (check all that apply)

☐ To earn research credit (PSY 3990 or 4990)
☐ To work on an Honors thesis or independent research project
☐ As a volunteer to gain experience in a research lab

List any previous experience as an RA: (Previous experience is not a pre-requisite)

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<th>Year/Semester:</th>
<th>Lab</th>
<th>Supervisor</th>
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Psychology majors: List the courses in cognitive psychology that you have taken or are currently taking. Other majors: List any psychology courses that you have taken or are currently taking. (Courses in cognitive psychology are not a pre-requisite):

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

How many hours a week can you dedicate to working in the lab? _______

Please list the times that you:

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<th></th>
<th>PREFER TO WORK</th>
<th>CANNOT WORK</th>
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FOR OFFICE USE ONLY

☐ CITI training completed _____________
☐ Form to add RA to active protocols: filed ____________, approved ___________
☐ Keys picked up __________
☐ Keys returned __________