

**B**rain **R**espiration **E**mbodiment **A**ffect & **T**ranslational **H**ealth Laboratory

Application for Research Assistantship

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Academic Year: \_\_\_\_\_

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

GPA: \_\_\_\_\_

**Briefly answer the following questions.**

What are your research interests or past experience?

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What days and hours are you available to work in the lab?

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Are you able to commute to the Downtown Medical Campus on a weekly basis?

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Background in neuroscience, biochemistry, psychophysiology or computer programming? Explain

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Can you commit to a minimum of 2 semesters of research in the lab?

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What are your plans for after graduation?

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Why should you be considered for this position?

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Email completed form to: [r.mcintosh@miami.edu](mailto:r.mcintosh@miami.edu)