

# Society of Toxicology

## Minority Undergraduate Advisor Award—Local

**2006 Annual Meeting  
March 4–6, 2006  
San Diego Convention Center  
San Diego, California**

The Award to Science Advisors of Minority Undergraduate Students provides advisors the opportunity to attend the Undergraduate Educational Program held at the Society of Toxicology Annual Meeting. The educational program is designed to recognize advisors and promising undergraduate science majors and inform them about the discipline of toxicology, opportunities in toxicology, and the preparation necessary for a research career. Other benefits of the program include participation in a scientific meeting and interaction with SOT member-mentors and peers. Local awardees receive registration for this meeting, some meals, and program materials. Advisors with the potential to encourage students to pursue graduate careers in toxicology are encouraged to apply. Each institution may submit applications for up to two advisors per year.

### ELIGIBILITY CRITERIA

- May have any racial/ethnic background.
- Must serve in a significant role as an advisor or mentor to students that belong to an ethnic/racial group under-represented in the sciences (African American, Native American or Hispanic American).
- May not have received the award in the previous two years.
- Can not be an active or pending SOT member.

### DIRECTIONS FOR COMPLETION OF APPLICATION

1. Complete the application form provided, including your signature.
2. Attach a copy of your brief *curriculum vitae* (1-3 pages).
3. Attach one sheet containing, on one side, a typed statement of 250 words or less that describes your activities encouraging minority students to pursue science careers.
4. Retain a copy of the completed application for your records.
5. Mail all applications from your institution in one envelope with one cover sheet, to arrive **no later than January 20, 2006**. Applications received after that date will not be considered.

### APPLICATION REVIEW CRITERIA

*Strength of application will be determined by:*

- Role of applicant, with preference for science faculty;
- Number of student applicants to this program from your institution;
- Evidence of scholarly activity;
- Accomplishments in and potential for mentoring of students.

# LOCAL APPLICATION

## 2006 Minority Undergraduate Advisor Award Program

1. Name of Advisor: \_\_\_\_\_
2. Institution: \_\_\_\_\_
3. Department or Program: \_\_\_\_\_
4. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_
5. Have you previously received a minority advisor travel award to attend a SOT Annual Meeting?  
Yes, in \_\_\_\_\_ (year) No \_\_\_\_\_
6. Are you a SOT member?  
Yes \_\_\_\_\_ No \_\_\_\_\_ Application pending \_\_\_\_\_
7. Students from groups under-represented in the sciences (African American, Native American, Hispanic American) make up approximately \_\_\_\_\_% of enrollment in science programs at this institution.
8. Gender: Male \_\_\_\_\_ Female \_\_\_\_\_
9. Racial background (*optional*):  
 African American       Native American including Alaskan and Hawaiian  
 Hispanic American       Other \_\_\_\_\_
10. Attach:
  - a. *curriculum vitae* of not more than three pages;
  - b. statement of 250 words or less that describes your activities encouraging minority students to pursue science careers.
  - c. copy of your school identification card and copy of your driver's license.
11. If I am accepted, I grant SOT permission to take photos of me during the meeting for SOT's noncommercial use in any and all media.  yes  no

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Faculty sponsor is to mail all the completed applications for that institution in one envelope to arrive by **January 20, 2006** to: Minority Undergraduate Student Awards, Society of Toxicology, 1821 Michael Faraday Drive, Suite 300, Reston, VA 20190

# Society of Toxicology

## Institutional Cover Sheet for Local Applications

*Please complete this form and enclose one copy with all applications from your institution.  
Up to five students and two advisors may apply from one institution.*

**Institution Name:** \_\_\_\_\_

**Institution Contact Name:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Advisor Applicants:**

1. \_\_\_\_\_
2. \_\_\_\_\_

**Student Applicants:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Student Application Checklist:**

Verify that each application includes the following items. Incomplete applications, and those not following guidelines, will not be reviewed.

<b>Completed By:</b>	<b>STUDENT</b>		<b>Student 1</b>	<b>Student 2</b>	<b>Student 3</b>	<b>Student 4</b>	<b>Student 5</b>
		Application form completed					
		Application form signed by student					
		One page (maximum) career statement					
		Transcript(s) attached (includes current semester)					
	<b>ADVISOR</b>	Application must be signed by advisor					
		Letter of recommendation					
		Institutional cover sheet					

Indicate the best descriptor of the student body at your institution. Predominantly:

African American  Native American  Hispanic American  Other (specify) \_\_\_\_\_

Return application packet to:  
**Society of Toxicology**  
**Minority Undergraduate Student Award Program**  
 1821 Michael Faraday Drive, Suite 300  
 Reston, VA 20190

**Deadline: Must arrive at SOT Headquarters by January 20, 2006.**