



OVERVIEW OF STARS RESEARCH PROGRAMS

The [Science and Technology Academicians on the Road to Success \(STARS\)](#) undergraduate research program provides opportunities for students to carry out independent research projects with the guidance of NSU Science and Technology faculty. Students learn the latest methodologies in research while improving observation and communication skills. Through meetings with great scientists, the STARS program promotes awareness of the diversity of research areas. The STARS program also conducts workshops and field trips that provide information and career guidance about research and other types of science professions in academia, government, and the private sector. STARS is intended for students with a genuine desire to pursue careers in biology, chemistry, computer science, engineering, mathematics, physics, or technology. Please contact Ms. Zenora Spellman concerning the STARS Research Program at 823.2889 or zespellman@nsu.edu - The following programs are combined under the STARS Program:

[Center for Materials Research \(CMR\)](#) - The Summer Undergraduate Research Experience Program at the Center for Materials Research offers you, as a student majoring in chemistry, physics or engineering, unique opportunity to participate in cutting-edge research projects sponsored by the National Aeronautics and Space Administration (NASA), the National Science Foundation (NSF), and the Department of Defense (DOD). As a participant, you will work on research problems of fundamental and practical importance in nanomaterials, photonics, and spin electronics. You may choose to work with random medium lasers, photovoltaic polymers, transparent gain ceramics, optical composites, computational modeling or spin-polarized transport phenomena. These materials and phenomena have applications in new generation computers, efficient conversion of sunlight into electricity, expansion of lasers applications, and improvement of optical communications. The program will immerse you in exciting research, and learning, while having fun and making new friends. We look forward to sharing with you our excitement for our research. For additional information, please contact Ms. Jennifer West at 823.2153 or jdwest@nsu.edu.

[Research Experiences for Undergraduates in Environmental Biology \(REU\)](#) - Norfolk State and Elizabeth City State Universities Departments of Biology (NSU) and Geological, Environmental and Marine Sciences (ECSU) are pleased to announce a 10-week collaborative research experience in Environmental Biology for twelve undergraduates during the summer. This collaborative program is funded by the National Science Foundation. For additional information, please contact Dr. Camellia Okpodu at 823.8512 or cmokpodu@nsu.edu.

[Washington, Baltimore, Hampton Roads – Louis Stokes Alliance Minority for Participation \(WBHR-LSAMP\)](#) - The Washington, Baltimore, Hampton Roads Louis Stokes (WBHR-LSAMP) is an alliance of seven historically black colleges and universities. The ultimate goal of the WBHR-LSAMP Program is to double the number students receiving a bachelor's degree in science, technology, engineering, and mathematics (STEM) and to encourage students to pursue graduate degrees. The WBHR-LSAMP program is offered to **juniors and seniors only**. For additional information, please contact Ms. Zenora Spellman at 823.2889 or zespellman@nsu.edu.

For additional information on the STARS Program, visit: <http://stars.nsu.edu>



Center for Materials Research

Deadline: March 1, 2005 (Please Print or Type Clearly)



GENERAL INFORMATION

- Name: _____

Last
First
MI
- _____ _____
Social Security Number Student ID Number
- _____ _____
Local or Campus Address City State Zip
- Local Phone Number: Area Code () _____
- _____ _____
Permanent Address City State Zip
- Permanent Phone Number: Area Code () _____
- Email: _____
- Race: African American White Hispanic Asian Native American Other _____
- Gender: Male Female D.O.B. _____
- U.S. Citizen: Yes No If no, Give Country _____

EDUCATIONAL INFORMATION

- Major: _____ Emphasis: _____
- Classification: Freshman Sophomore Junior Senior
- Number of Credits Completed: Total _____ Major _____ G.P.A. _____
- Graduated: Yes No What Year: _____ 5. Anticipated Graduation Date: _____
- Honors and Extracurricular Activities: _____

- Desired Program: CMR/NSU only (June 1st – July 22nd) NSU-GTech (May 23rd – July 22nd)

ADDITIONAL INFORMATION

Please Submit:

1. An essay consisting of no less than 300 words. This essay should describe why this program will benefit you professionally and your future plans (graduate/career) upon completion of your undergraduate degree.
2. 2 completed recommendation forms.

[Download at http://vigyan.nsu.edu/~cmr/cmrseminars.htm](http://vigyan.nsu.edu/~cmr/cmrseminars.htm)

3. Resume
4. Official transcript

Please return application packet to the CMR Office, Room 103 Woods Science Building or mail to CMR; Norfolk State University, 700 Park Avenue, Norfolk, VA 23504, Attn: Jennifer West-Barlow; 757-823-2153. All of the above materials must be included.

NSU SST STARS Undergraduate Research Program Guidelines for Students

Weekly Hours: You will need to work a **minimum of 10** hours a week during the academic year and at least **30 hours** a week during the summer. You must record the time you spend in the lab on the time sheet provided by the program. You **MUST** submit your time sheet to the STARS office in a timely manner, according to the established schedule.

Compensation: Your compensation depends on your classification and it is tax-free. You will be paid periodically throughout the academic year/summer. Some of your stipend is linked to mandatory presentations. **You may be terminated at any time due to poor performance. If you miss any mandatory activity your stipend will be reduced.** There are limitations in your stipend due to financial aid requirements. We will assist you in determining your eligibility. You may not receive compensation from two sources for the same activity. You will be requested to return your stipend if we determine that you have done so.

Mandatory Meetings & Activities: A calendar will be distributed of mandatory meetings and activities of all student interns. **Check your e-mail daily for updates.**

Final Report: At the end of the STARS Research Program, you will prepare a **poster and oral presentation** highlighting your work and results. You must also write a final report which covers your research analysis. **You must present your poster at the Fall Undergraduate Research Symposium.**

Mentor and Student Assessment: At the end of the program, your mentor will have an opportunity to evaluate your performance and vice versa. Evaluation forms will be provided.

Mentors: Your mentor has volunteered her/his time to advance your professional training. You should show your appreciation by assisting your mentor as much as possible and applying yourself to your work.

Other things to remember: Since most of your work will be done without significant supervision, you are responsible for setting and reaching goals and milestones. It can be very helpful to keep a log of what you do on your project. This effort can be a guide to you so that you can best utilize your time and discover where your difficulties lie. The STARS program only provides funds for your stipend. No other costs can be supported through the project's budget.

Resolving Problems: Your mentor will assist you with your research. If you have problems unrelated to your research during the internship period, you may contact either Zenora Spellman at 823-2889 (zspellman@nsu.edu) or Valencia Ingram at 823-2694 (vhingram@nsu.edu)

I agree to adhere to all program guidelines: **accept** **decline**

Name: _____

Signature: _____

Date: _____

Norfolk State University
Science and Technology Academicians on the Road to Success (STARS)
Faculty Recommendation Form
Please Print or Type all Information

To be completed by applicant:

Name: _____

Student ID or Social Security Number: _____

I do do not waive my rights to examine this application form. If you do waive your rights, the NSU faculty member should place this form in a sealed envelope with your name on the front and sign the back of the envelope.

To be completed by NSU Faculty member:

How long have you known this applicant? _____

In what capacity: (Circle) Instructor Academic Advisor Senior Seminar Advisor Other: _____

Among other students you have taught, how do you rank the applicant's:

- | | | | |
|---|---|--|--|
| 1. Oral Communication Skills | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 2. Written Communication Skills | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 3. Initiative | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 4. Computer Skills | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 5. Research Experience | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 6. Career Aspirations/Goals | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 7. Ability to Work in a Team | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 8. Ability to Work Independently | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 9. Relationship to Others in Department | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |

If you have anything additional to express about this student, please write them on the back of this form or make a separate attachment. Check if there is any additional information.

PRINT NAME: _____ DEPARTMENT: _____

SIGNATURE: _____ DATE: _____

Norfolk State University
Science and Technology Academicians on the Road to Success (STARS)
Faculty Recommendation Form
Please Print or Type all Information

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| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
| 5. Research Experience | <input type="checkbox"/> Exceptional (top 3%) | <input type="checkbox"/> Excellent (top 10%) | <input type="checkbox"/> Very Good (top 40%) |
| | <input type="checkbox"/> Good (top 60%) | <input type="checkbox"/> Poor or inadequate | <input type="checkbox"/> Not able to observe |
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PRINT NAME: _____ DEPARTMENT: _____

SIGNATURE: _____ DATE: _____