Social and Behavioral Neuroscience Dual-Title Declaration

Name:_____

Home Department:_____

Dept. Grad Coordinator name:_____

Email:_____ Phone:_____

Graduate Advisor Name:_____

Undergraduate Degree Information

Degree:_____

Year:_____

Institution:_____

Relevant background information (coursework, experience, etc.).

In addition to this form, please submit the items below to the Social and Behavioral Neuroscience Dual-Title Program Director
Chaleece Sandberg, Ph.D.
cws18@psu.edu

(1) A statement (no more than 1 page) of research interests conveying how the dual-title in Social and Behavioral Neuroscience would support your professional and scientific goals.

(2) A statement from your advisor stating that they support your intention to pursue the dual-title program and agree that it is in your best interest, and that you will have access to research that fulfills the criteria for the dual-title.