

Name: _____

Home Department: _____

Primary Program Staff Grad Coordinator: _____

Email: _____ Phone: _____

Graduate Advisor Name: _____

Date of entry to primary program:

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
Lisa Gatzke-Kopp, Ph.D.
lmk18@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) An unofficial copy of your undergraduate and graduate transcripts.

(3) 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.