



**CCBS Undergraduate Summer Institute (CUSI)
Scholarship Request
Application Deadline: April 30, 2025**

Program Information

CUSI is an interactive program comprised of research talks and professional development workshops for undergraduates who may pursue research careers in academic or industry settings. The research content spans the various sub-disciplines of cognitive and brain sciences while the development workshops cover topics including writing, being an effective undergraduate researcher, and applying to graduate school. CUSI is held over eight sessions during the summer term. This document is for applicants applying for summer funding.

Eligibility and Details

Applicant Eligibility

Applicants must be matriculated undergraduate students at Ohio State University, working at least 10 hours per week as undergraduate research assistants within an OSU lab for the duration of the program. Students must have support from their faculty research advisors and are expected to attend all eight sessions of the CUSI program. Students should be working on research projects related to the cognitive or brain sciences.

Program Details

Dates: Mondays in June and July (June 2, 9, 16, 23, 30 & July 7, 14, 21)

Times: 10:00 A.M. - 1:00 P.M. EST

Location: Psychology Building, Room 35, OSU Main Campus

Meals: A catered lunch will be provided during each session. We can accommodate most dietary preferences.

Scholarship Information

CCBS is pleased to offer funding for the students admitted to the CCBS Undergraduate Summer Institute (CUSI). Undergraduate students applying to the CUSI program are eligible to compete for a scholarship for research participation in the months of June and July 2025. This award is intended to provide students working in unpaid or low-paid research positions at OSU with the opportunity to gain financial support. CCBS awards cannot be deferred to any other session or year.

Scholarships are valued at \$15 per hour, but the total amount varies for each student. We aim to fund students based on the total expected hours they will work in their lab during the 8-week CUSI program. If a student receives partial funding that is less than \$15 per hour, the scholarship can help cover the remaining pay gap.

To apply for a scholarship, please complete this application and submit your extra documents. Those include:

1. Proposal of your summer research project, 1-2 pages single-spaced
2. Letter of support from your research advisor, maximum 1 page
3. Optional, Adversity Statement: Academics and extracurricular achievements can be impacted by a number of challenges. For example, students who hold regular employment or who are first-generation college students may not have the same access to opportunities and support as students from other environments. Adversity can shape who you are and what you have to offer your peers. If you have faced any significant adversity in life or school, please describe it here. (maximum 300 words)

Please direct questions about the CUSI scholarship or its requirements to ccbs@osu.edu.



Section 1: Applicant

Applications should include pages 2-3 of this form as well as these items: university transcript, resume or CV, and personal statement. Also include your scholarship-specific materials. See our website for more information.

Name (First & Last) _____

Email (OSU name.#) _____

Pronouns _____

Major _____

Expected Graduation Date (semester/yr) _____

Department or Major _____

Section 2: Research

Name of OSU Lab you work in _____

Expected # of hours per week you will work in the lab _____

Faculty Supervisor Name _____

Faculty Supervisor Email _____

Faculty Supervisor Department _____

Faculty Supervisor Job Title _____

Please describe the area(s) of research being conducted in your lab:

Section 3: Scholarship Election

Select the statement that best reflects your situation this summer.

- I have partial funding from June to July. Funded amount (\$/hour): \$ _____ / hour
- I have no funding from June to July. I am working as a volunteer.

Continued on next page.



Section 3: Agreements

Applicant Agreement:

By signing below, the applicant certifies that the information provided is correct and understands that CCBS has a limited number of scholarships. Requesting aid does not guarantee receiving it, as all requests will undergo a review process to confirm eligibility. Aid requests will not affect acceptance into the CUSI program. CCBS is not responsible for placing students in OSU research labs, and students must be admitted to CUSI to receive a scholarship. If awarded, recipients must attend all 8 CUSI sessions or risk repaying the scholarship, which cannot be deferred to another session or year. Scholarships are disbursed through Student Financial Aid as a lump sum.

Applicant Signature _____

Date _____

Faculty Supervisor Agreement:

This form confirms that the applicant named above will participate in your summer research lab and has your support to attend CUSI program meetings, held from 10 AM to 1 PM on eight consecutive Mondays in June and July.

The CCBS Undergraduate Summer Institute (CUSI) is an interactive program offering research talks and professional development workshops for undergraduates pursuing research careers. Its goal is to enhance the students' in-lab experience and connect them with peers. Please note that your home unit remains responsible for hiring the Student Research Assistant and processing any volunteer paperwork. By signing below, you confirm that the student will work in your lab for at least 10 hours per week from June to July 2025 and you support their participation in CUSI activities.

Regarding your student's scholarship request, provide the following information.

*Confirm the expected number of hours per week this student will work in your lab from June-July: _____

*Confirm the compensation rate the student employee will receive (\$/hour): _____

Please note that faculty supervisors should be affiliates of the Center for Cognitive and Brain Sciences before submission of this application. If you are not an affiliated member, please complete our quick member form at cog.osu.edu/membership/new_member

Advisor Signature _____

Date _____

Thank you for your interest in CCBS Undergraduate Summer Institute

Learn more at <https://cog.osu.edu/programs/cusi>

Send forms to CCBS@osu.edu