



URSD- Faculty Mentor Verification Form

Semester 1:

Spring/Summer/Fall
(circle one)

YEAR: _____

I affirm that (student's name) _____ has worked with me on research or creative work for the above semester indicated at the University of Utah in the Dept. of _____, **OR** has participated in the _____ research program at the University of Utah.

Faculty Name Printed: _____

Faculty Signature: _____

Faculty E-mail: _____

Semester 2:

Spring/Summer/Fall
(circle one)

YEAR: _____

I affirm that (student's name) _____ has worked with me on research or creative work for the above semester indicated at the University of Utah in the Dept. of _____, **OR** has participated in the _____ research program at the University of Utah.

Faculty Name Printed: _____

Faculty Signature: _____

Faculty E-mail: _____