

**Application Deadline:**

**5:00pm Wednesday, February 22, 2017**

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| **APPLICATION SUPPLEMENT FORM Please respond in type in the spaces below.**  |
| Name (LAST NAME IN CAPS, First name, M.I.)      | Class:      | Permanent (non-Harvard) e-mail address:      |
| House/Yard affiliation:      | HUID:      | Concentration (declared or likely):      |
| **Please indicate your preferences among BLISS projects, as described at http://www.fas.harvard.edu/socsci/BLISS2015Projects.html** |
| 1st choice faculty host:       | Project title:      |
| 2nd choice faculty host:       | Project title:      |
| 3rd choice faculty host:       | Project title:      |
| Do you have any obligations this summer that may preclude your full commitment to participation in BLISS for the ***full ten weeks*** of the program (June 5-August 11)? If so, please elaborate briefly.      |
| Is summer 2017 the only summer during your undergraduate studies that you will be able to participate in BLISS? If so, please elaborate briefly.      |
| **In a separate document, please provide responses to the following three statements. Please be sure to include your name at the top of the page(s).** |
| **Describe why you are interested in participating in BLISS and how your preferred project(s) relate to your academic goals.** (500 words maximum)**Describe how you expect that participating in BLISS will inform your academic trajectory or contribute to your professional goals.** (300 words maximum)**Describe how you will contribute to, and benefit from, the BLISS community of researchers.** (300 words maximum). |
| **SIGNATURE REQUIRED****PLEASE SUBMIT ALL APPLICATION MATERAILS TO CARAT AT** [https://apps2.registrar.fas.harvard.edu/carat/](https://apps2.registrar.fas.harvard.edu/carat/admin/search)**.****DEADLINE: WEDNESDAY, FEBRUARY 22, 2017** |
| I affirm that the foregoing statements and attached materials are true and accurate representations of me and my application to BLISS. |
| Entering your name in this space affirms your signature:      |  Date:       |