

## Center for Children and Families Research Lab Application

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Best time to reach \_\_\_\_\_ Work Phone \_\_\_\_\_

Major(s) \_\_\_\_\_ Year \_\_\_\_\_ GPA \_\_\_\_\_ Psych \_\_\_\_\_

GPA \_\_\_\_\_

E-mail address \_\_\_\_\_

Relevant previous courses and grades:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Why do you want to join this lab? \_\_\_\_\_

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\_\_\_\_\_

What areas of psychology are you interested in? \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Over

What skills or training do you have that would benefit this lab? \_\_\_\_\_

\_\_\_\_\_

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What are your computer skills? \_\_\_\_\_

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What experience have you had working with children?\_\_\_\_\_

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What do you plan to do after you graduate?\_\_\_\_\_

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What days and times are you available next semester?\_\_\_\_\_

**Please return completed applications to 318 Diefendorf Hall, 3435 Main Street, Buffalo,  
NY 14214 or via fax at 829-3692.**