

TUBERS Program

I, _____ (your name here), affirm that all of the information in this application is accurate, and that if accepted to the Tufts University Biomedical Engineering Research Scholars Program, I will commit to the program requirements described above. I understand that if I fail to fulfill the program requirements, I may be removed from the program. Furthermore, I understand that I will be trained in safety as required by the specific laboratory I work in and will not hold Tufts University, the Biomedical Engineering Department, my faculty mentor and other students in my lab responsible for any injury caused by my failure to follow the proper safety guidelines.

Student Signature Date

Parent/Guardian Signature Date