



**SUNY  
DOWNSTATE**  
Health Sciences University

## THE ALFRED STRACHER GRADUATE STUDENT RESEARCH FORM

Student Applicant's Name

Title of Manuscript included in the package

Description of your role on the project and manuscript preparation (500 words or less)

College/School (check one)

College of Medicine

College of Nursing

School of Public Health

School of Graduate Studies

School of Health Professions

School and Department where research was performed

Advisor's Name

Date of expected graduation

Student Applicant's Email

Student Applicant's Phone