



SCHOOL OF PUBLIC HEALTH

INDIANA UNIVERSITY

Department of Epidemiology and Biostatistics
Bloomington

Research for Undergraduates Summer Institute of Statistics

Indiana University -- **RUSIS@IU** --

May 27th – August 1st, 2025

RUSIS@IU Application

Deadline – April 21st, 2025

Name	_____	Date	_____
Address	_____	Tel	_____
	_____	email	_____
	_____	Date of Birth	_____
	_____	Place of Birth	_____

US citizenship or Permanent Resident Status: Yes ____ No ____

Student Classification During Academic Year 2024 – 2025: (Check only one)

Freshman ____ Sophomore ____ Junior ____ Senior ____ Graduate ____

Institution: _____

Major/Minor: _____

GPA: _____ Number of Credit hours: _____

Expected Graduation Date: _____

Current Mailing Address _____

Gender: _____ Ethnicity: _____

List honors, scholarships, awards that you have received as an undergraduate

Provide a statement indicating why you think that this summer program is important to your professional development. Attach separate pages if needed.

Please write about your preferences for, and experiences related to, working in group or in individual projects. Please provide details. Explain why you prefer the option that you have selected.

You must provide at least two letters of recommendation. List the names and contact information of two professors who will provide the reference forms. Please ask the faculty members to mail or email their reference letter to the address below.

Letters must be from college faculty who know you well and can comment on your previous mathematical and/or statistical work. Letters must be on letterhead and signed.

Names of faculty and contact information: (Tel no., email address)

Please mail or email (email is strongly preferred) your application together with a copy of your **official transcript to**

POST MAIL

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Dean's Eminent Scholar
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