**UBC Sexuality and Well-being (SWELL) Lab Research Assistant Application Form (Dr. Samantha Dawson)**

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| **Name:**  **Preferred Pronouns:** .  **Email:** | **Student #:**  **Phone #:**  **Year/Degree Program:** |

|  |  |  |  |
| --- | --- | --- | --- |
| Grade average in each completed year of University: | | | |
| 1st: | 2nd: | 3rd: | 4th: |

|  |
| --- |
| Overall grade average in Psychology |
| % |

1. Why are you interested in volunteering for the SWELL Lab?
2. What experience do you have that you think would make you a good fit for the lab?
3. What do you hope to learn/gain from volunteering?
4. What are your future education and career goals?
5. Please mark all the times you are available to volunteer or attend meetings:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
| 9:00 AM |  |  |  |  |  |
| 10:00 AM |  |  |  |  |  |
| 11:00 AM |  |  |  |  |  |
| 12:00 PM |  |  |  |  |  |
| 1:00 PM |  |  |  |  |  |
| 2:00 PM |  |  |  |  |  |
| 3:00 PM |  |  |  |  |  |
| 4:00 PM |  |  |  |  |  |
| 5:00 PM |  |  |  |  |  |

1. On average, how many hours are you available to volunteer in the lab per week?

*Thank you for your interest in the SWELL Lab! Please send your application package (including application form, CV, transcript, and class schedule) and any questions/requests to* [*leor.elizur@ubc.ca*](mailto:leor.elizur@ubc.ca) *and* [*swell@psych.ubc.ca*](mailto:swell@psych.ubc.ca)