

# UNDERGRADUATE SUMMER STUDENTSHIP APPLICATION FORM

2026

This form should be completed electronically and e-mailed to [students@lms.mrc.ac.uk](mailto:students@lms.mrc.ac.uk) Mac users should NOT complete the form in Mac Preview. It is best viewed in the latest version of [Adobe Reader](#) which is free to download. Incomplete applications will not be considered.

**Application deadline: Tuesday 28 April 10:30am.** If you do not receive confirmation of your application by COP Thursday 30 April, please contact us by email.

## Personal Details

Family name		Forenames		Title (e.g. Mr, Ms, Dr)	
Home or Permanent Address		Address for Correspondence (if different)		Home Telephone Number	
				Daytime/Work Telephone Number	
				Mobile Telephone Number	
Date of Birth (dd/mm/yy)	Gender	Preferred Name	E-Mail Address		
	Gender:				
	Gender Pronouns:				
Current Country of Residence		Date you took up residence in that country	Nationality (State if pre-settled/settled)		
Visa Information					
Do you/will you require a visa to work in the UK?		Yes	No		
If yes, do you currently hold a UK visa?		Yes	No		
If yes, does your current visa allow you to work (and receive payment for work) outside of term time?		Yes	No		
<p><i>Please note due to the timeline of the recruitment process we are unable to accept students who will need to apply for a visa to attend the programme. Students with existing UK visas that do not restrict them from working outside of term time are eligible for this programme. Students who have settled status or 'right to work' status that does not prevent them from working outside of term time are eligible for this programme. British citizens and UK Home Students are eligible for this programme. Evidence of your 'right to work' and/or visa/passport will be requested during the recruitment process.</i></p>					
What is your ethnic background or ancestry? (Please select all that apply)					
Native American and Inuit		Asian Other (Central Asian/East Asian/Pacific Islander)			
White/Caucasian		Middle Eastern/Arab/Persian			
Black		Hispanic			
South Asian		Mixed			
Other (Please specify):					
Are you the first generation in your family to attend university?		Yes	No		

## Referee

Give the name, address (**including e-mail address**) and telephone number of an academic referee, preferably your academic tutor. They will be contacted if your application is shortlisted.

Name:

Address:

Tel:

Email:

## Monitoring

Where did you first hear about studentship opportunities at the MRC Laboratory of Medical Sciences?

## Education and Qualifications

Secondary/High School Education: please give name and location of school, dates of attendance, all A level (or equivalent) subjects and grades. Add earlier secondary school qualifications below as space allows.

Result	Subject	Level (e.g. A Level)	Date (MM/YY)	School

**University Education: please give name and location of university, type of degree, and details of topics studied**

Degree  
(e.g. BSc Biology)

University

Year of Course e.g. 2<sup>nd</sup> year of a 3-year course = 2/3

Year of Graduation:

**Prizes and Other Outstanding Achievements**

Year	Name/Details

Have you previously been awarded a Nuffield undergraduate research bursary or other vacation scholarship?

Yes  No

**Work Experience**

**List any relevant posts you have held, including vacation work (starting with the most recent)**

Employer	From (mm/yy)	To (mm/yy)	Position Held

**Other Interests and Skills**

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## Personal statement

Please tell us in your own words why you wish to participate in this programme, and any other information you think is relevant to your application. Limit your answer to the space provided (about 500 words).

Will this work contribute directly to your degree? (eg. is this part of your final project; will you receive a mark which will contribute to your degree from this project?)

Yes  No

If Yes, please explain:

## Research interests

Please rank the following in order of interest

Field of research (1=highest, 8=lowest)		Research methods (1=highest, 7=lowest)	
<input type="checkbox"/>	Bioinformatics	<input type="checkbox"/>	Biochemistry
<input type="checkbox"/>	Cancer	<input type="checkbox"/>	Cell Biology
<input type="checkbox"/>	Chromatin	<input type="checkbox"/>	Computers
<input type="checkbox"/>	Epigenetics	<input type="checkbox"/>	Genetics
<input type="checkbox"/>	Gene Regulation	<input type="checkbox"/>	Imaging
<input type="checkbox"/>	Genomics	<input type="checkbox"/>	Molecular Biology
<input type="checkbox"/>	Metabolic	<input type="checkbox"/>	Protein Chemistry
<input type="checkbox"/>	Neurobiology		

## Other Information

Use this space if you would like to articulate challenges you have overcome during your work or studies (for example, needing to work part-time, financial pressures or caring responsibilities). Anything written in this space will be used to ensure your application is considered fairly in comparison to other applicants who may not have had the same barriers. (Please limit your response to 1000 characters or less)

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**Declaration**

**I certify that the information given in this form is complete, up-to-date and correct.**

**Signature of Applicant**

**Date**