

UBSDM 2026 Summer Dental Research ProgramStudent and Mentor Agreement

Please complete this form and submit a digitally signed version to Imon Candelaria at imongosw@buffalo.edu by **February 13, 2026**.

Student and Mentor Information Student Name: _____ SDM Class: _____ Student UB Email: Mentor Name: _____ Department: _____ Mentor UB Email: **Project Information and Research Compliance** Project Title: _____ Location(s) where this research will be performed (building and room number): This research will include the use of (check all that apply): ☐ Human Subjects* ☐ Animals ☐ Radiation (e.g., X-rays, CBCT, radiochemicals) *"Human subjects" includes living humans, stored data (e.g., images, dental records), and/or specimens (e.g., tissues or fluids). NOTE: If any of the above apply, institutional approvals from the IRB, IACUC, and/or

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Radiation Safety Committees are required prior to the start of the research.



Student Statement of Responsibility

To participate in the Summer Dental Research Program, I agree to the following:

- I cannot be on academic probation as of June 1, 2026, and my GPA must be greater than 3.0.
- I will complete all required training and obtain necessary institutional approvals (e.g., IRB, IACUC, Radiation Safety) before beginning my research.
- I must meet the conditions outlined in (a) and (b) to receive the first stipend payment.
- I will devote consistent, scheduled time to my project throughout the entire 8week program period.
- I will attend all weekly program seminars in person during Early Fall as part of CLD 870.
- I will prepare and submit an abstract and present my research findings at Student Research Day (Spring 2027).
- I understand that satisfactory research progress, attendance, and mentor verification are required to receive the second stipend payment.

☐ Yes, I have read	l and agree to these terms.		
Student Signature: _		Date:	

Mentor Statement of Responsibility

I approve this project and agree to provide the necessary environment, resources, and supervision for the student to successfully complete the research as described in the proposal. I will:

- Meet with the student at least once every two weeks to provide guidance and monitor progress.
- Assist in preparing any required institutional protocols or applications (IRB, IACUC, etc.).
- Ensure that my own training credentials are current.
- Support the student's participation in the 8-week summer program and related scholarly activities.

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 Affirm that the project proposal is original and was jointly developed by the student and mentor with meaningful contributions from both parties. 		
☐ Yes, I have read and agree to these terms.		
Mentor Signature: Date:		

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