**RESEARCH EXPERIENCE FOR TEACHERS**

**(RET)**

**ALL MATERIALS ARE DUE MARCH 1ST, 2024**

**June 26th – Aug 9th**

 **Check list**

* **Contact Information**
* **Work Information**
* **Resume**
* **Statement of Research Interests**

**Please submit to:**

garciaresearch@stonybrook.edu with the subject line

“RET 2024 – [INSERT YOUR NAME]”

If you have any further questions regarding the program, call or email

Dr. Michael Cuiffo

garciaresearch@gmail.com

Tel: 631-632-6097

**RET Summer Program Application for 2024**

**June 26 – August 9**

**PLEASE PRINT!**

**I. Contact Information:**

**Name of Applicant (Last, First, Middle Initial)**

**Home address**

**City State Zip code**

#  **Home telephone number Cell phone number**

# **E-mail address**

**II Work Information**

**Name of School**

**School address**

**School telephone number Fax number**

**Grades taught**