



**The Department of Computer Science  
The Department of Biology  
The University of Akron  
National Science Foundation  
Workshop for Teaching Undergraduate Bioinformatics through  
Collaboration and Inquiry  
Application**

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**Personal Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Academic Information:**

Institution: \_\_\_\_\_

Academic department: \_\_\_\_\_

Academic position: \_\_\_\_\_

Years of teaching experience: \_\_\_\_\_

Courses commonly taught: \_\_\_\_\_

**In the space below briefly describe why you are interested in participating in this workshop:**

**Please attach a copy of your recent curriculum vitae.**

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