



## Student *Monthly Labor Review (MLR)* Submission Form

Submit form and associated files to: [Studentmlr@bls.gov](mailto:Studentmlr@bls.gov)

### Contact information

Student Name: \_\_\_\_\_ Student Email: \_\_\_\_\_

Advisor Name: \_\_\_\_\_ Advisor Email: \_\_\_\_\_

Form submitted by:  Student  Advisor/Professor

### Education Information

University: \_\_\_\_\_ Major: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_ Year in School: \_\_\_\_\_

Degree Type:  Undergraduate  Masters

### Submission Information

Paper Title: \_\_\_\_\_

Abstract (150-word limit):

I affirm that this article is original work, written by the names individual(s), and that all contributors and references are properly credited. I have the rights to the is work and it has not been published elsewhere.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed this student's work and find it to be appropriate for submission to the Student *MLR*.

Adivsor Signature: \_\_\_\_\_ Date: \_\_\_\_\_