2019 SCICU UNDERGRADUATE STUDENT/FACULTY RESEARCH APPLICATION
COMPLETE A SEPARATE APPLICATION FOR EACH STUDENT INVOLVED IN THE PROJECT
and please read the Guidelines in advance—available at:
https://www.furman.edu/undergraduate-research/

TITLE OF PROJECT: ________________________________________________________________

____________________________________________________________________________________

COLLEGE: ___________________________________ PROJECT DATES: __________ / __________
BEGIN CONCLUDE

IF YOUR PROJECT IS FUNDED, PLEASE INDICATE YOUR SYMPOSIUM PRESENTATION PREFERENCE
(CHECK ONE): ______ ORAL ______ POSTER _______ NO PREFERENCE

STUDENT’S INFORMATION

NAME: _______________________________ _______ _______________________________
(FIRST) (MIDDLE) (LAST)

E-MAIL: __________________________________________

TOTAL CREDIT HOURS COMPLETED AT TIME OF PROPOSAL SUBMISSION: __________

MAJOR: _______________________________ CUMULATIVE GPA: __________

CLASSIFICATION (CIRCLE ONE): FRESHMAN SOPHOMORE JUNIOR

SIGNATURE OF STUDENT / DATE

FACULTY SPONSOR(S)

NAME: _______________________________ DEPT: _______________________________

RANK: _______________________________ PHONE #: (____) _______________________

E-MAIL: _______________________________

SIGNATURE OF FACULTY SPONSOR / DATE

ACADEMIC DEAN

NAME: _______________________________ PHONE #: (____) _______________________

2019 SCICU UNDERGRADUATE STUDENT/FACULTY RESEARCH PROGRAM

FACULTY ENDORSEMENT/QUALIFICATIONS FORM
(Approximately 500 characters per section)

1. How will you document student hours spent on the project, work performed by the student(s), and report the information to SCICU?

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

2. How will you support the student(s)?

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

3. What learning outcome(s)/goals do you expect your student(s) to achieve?

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

4. Please list your qualifications to support the project and the student(s) involved.

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

(Your signature indicates that the research undertaken in this project fully complies with your institution’s IRB & Animal Care Policies)
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STUDENT ACTIVITY/RESPONSIBILITY FORM
(To be completed by the student/s involved in the research project.
Approximately 500 characters per section)

1. What are your qualifications to conduct the project?

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
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___________________________________________________________________________
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2. What learning outcome(s)/goals do you hope to achieve?

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________________________________________
SIGNATURE OF STUDENT(S)
2019 SCICU STUDENT/FACULTY UNDERGRADUATE RESEARCH PROGRAM
BUDGET JUSTIFICATION FORM

TOTAL BUDGET: $__________

EQUIPMENT $__________ Equipment purchased with funds received through an SCICU grant becomes the property of the SCICU member institution and disposition will be at the discretion of the institution’s Academic Dean. Funds may be requested for specialized hardware or software additions to existing computers.

SUPPLIES $__________

TRAVEL $__________ Includes mileage, air-fare, meals, and lodging while conducting research related to the SCICU funded project. Travel costs for student(s) to attend the SCICU Research Symposium or other professional conferences are not allowable expenses.

STUDENT STIPEND $__________ Student stipends will be funded at $8.00 an hour. No student stipend will be paid for work resulting in academic credit. Sponsoring faculty member(s) are responsible for providing justification for the estimated number of hours needed to complete the project and provide approximate dates for the span of time encompassing primary work involved in the project.
OTHER $_________  Indicate all other costs involved in the project