



2015/2016 One Health Graduate Research Grant Applicant Information Form

Applicants: Submit your completed application electronically, no later than Friday, January 15, 2016 at 5:00pm. In the subject-line of your email submission please include your departmental abbreviation_your last name_OHGRG. For example, if Jane Doe from sociology were applying, the subject line would read: soc_doe_OHGRG.

TITLE of PROPOSAL:

TOTAL AMOUNT REQUESTED:

Principal Investigator:

1) Personal

- a. Last Name: _____ First Name: _____
- b. Student ID Number: _____
- c. Department: _____
- d. School/College: _____
- e. Phone: _____ Email: _____
- f. US Citizen/Permanent Resident OR International: _____

2) Degree Progression

- a. Date of First Enrollment (month/year): _____
- b. Expected Date of Graduation: _____
- c. Degree Sought (PhD, MD, etc.): _____
- d. Dissertation Chair/Mentor: _____

3) Diversity

- a. First/primary language spoken in home: _____
- b. Father's highest level of education completed: _____
- c. Mother's highest level of education completed: _____
- d. Are you a single parent? _____
- e. Did a single parent raise you? _____
- f. Did you attend an inner-city or impoverished high school? _____



2015/2016 One Health Graduate Research Grant
Advisor Recommendation Form
(Note: A “wet” signature is required)

Advisor/Chair:
Department:
School/College:

Applicant:

Dear One Health Graduate Research Grant review board,

I am the advisor/mentor/dissertation chair of the above-named student and am writing to express my support for their One Health Graduate Research Grant application.

I hereby attest the student is in good academic standing with the University and is on-track to complete their degree within the normative time frame. Additionally and to the best of my knowledge, the student possesses the methodological and substantive knowledge necessary to successfully complete the project outlined in their research proposal.

Sincerely,

Department Advisor/Mentor/Dissertation Chair