

Sheila Van Zandt Student Research Experience Scholarship

This scholarship will be awarded to an undergraduate/graduate student research team based on merit of the proposed research. The students are to fill out the attached form, including a budget, 1 page proposal and signatures of the students and faculty member supporting the research. The research proposal should be prepared collaboratively. The Department of Microbiology is committed to supporting diversity in research and strongly encourages applications from underrepresented and/or first-generation students.

As the donor intends to provide support to both the undergraduate researcher and graduate mentor, the budget can include travel support for either or both students, undergraduate salary and money for supplies (and other costs if justified). We expect to be able to fund 4 projects at \$1,800 each this year (2016), then one project at \$1800 for subsequent years. We hope that the students will be able to use this as leverage for travel funds from the College of Science and Graduate School.

Proposals are due March 1 and awards will be made by April 15 to allow research summer term. Requirements of the award are a thank you letter to the donor and either an oral presentation at an undergraduate research colloquium, poster presentation at the MSA research symposium Spring term, or at another department venue during the year in which the award was received.

Sheila Van Zandt Student Research Experience Scholarship
Application Form

1. **STUDENT NAME:** _____

Major: _____

Phone: _____ Email: _____

Expected Date of Graduation (m/yy): _____ Current GPA: _____

2. **GRADUATE STUDENT NAME:** _____

3. **FACULTY PROJECT ADVISOR:** _____

4. **PROJECT TITLE:** _____

5. **BUDGET (UP TO \$1,800):**

Student Wages (calculate at rate \$ ___/hr x ___ hrs.....) \$ _____

Travel Expenses (*justification*)..... \$ _____

Supplies, Equipment Rentals and Expendables..... \$ _____

Other (*justification*)..... \$ _____

TOTAL Budget Request..... \$ _____

6. **REGULATORY COMPLIANCE:** Due to the regulatory compliance requirements inherent in research it is the responsibility of the FACULTY PROJECT ADVISOR to submit the proper forms and receive approval from the appropriate compliance committee(s) **PRIOR** to the initiation of the research project with sufficient time to allow for the review process. Signature below indicates compliance with this requirement.

7. **SIGNATURES:** (**ALL signatures REQUIRED**)

I (the students) give Oregon State University permission to use my name, proposal, final report, photos and a summary and/or excerpts of it, for the OSU website and/or other publications for the sole purpose of sharing information about research and scholarship for students (see <http://oregonstate.edu/research/incentive/urisc.htm#Other>).

Undergraduate Student Signature Date

Graduate Student Signature Date

Faculty Project Advisor Signature Date

Proposed Research (1 page):