



## SOUTHWESTERN ASSOCIATION OF PARASITOLOGISTS

### STUDENT RESEARCH GRANTS



Please complete this form, and submit along with a brief proposal, not to exceed one page, single-spaced, minimum 12 pt font. If necessary, you may include literature citations on a single separate page.

Please submit this form and proposal by **April 3, 2020** to Dr. Heather Stigge by *email attachment* to [hstigge@csu.edu](mailto:hstigge@csu.edu). Please include "SWAP Student Research Award" in the subject line of your e-mail.

Name of Applicant: \_\_\_\_\_

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

Phone number: \_\_\_\_\_ email: \_\_\_\_\_

Faculty advisor: \_\_\_\_\_

Degree sought:      Undergraduate      Master's Degree      Doctoral Degree

Month and year of anticipated graduation: \_\_\_\_\_

Title of Proposed Project: \_\_\_\_\_

Prepare an itemized budget organized into appropriate categories (e.g., equipment, supplies, travel).

Item and Number or Units of Each	Unit Cost	Total Cost
----------------------------------	-----------	------------

Amount Requested (\$250 maximum) \$ \_\_\_\_\_

Provide a concise justification for the proposed budget expenditures in the space below.

\*This form is field writable, but requires the Adobe Acrobat full version to save information entered before closing the file; if only Adobe Reader is available, you can print the form before closing the file and mail it, or scan it and convert to pdf.