Student Research Grant Application

Department of Psychology

Name(s): SID(s):

Faculty Advisor:

IRB Approval: Yes\_\_\_\_\_\_ No\_\_\_\_\_

1. \*Have you applied for a MSSU Student Research Grant? Yes\_\_\_\_\_ No\_\_\_\_\_
2. Research Title:
3. Description of Research Project (include 1-2 paragraphs summarizing your research project):
4. Projected Costs (itemized):
5. Amount of Funds Requested:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Faculty Supervisor Signature/Date |  | Student Signature/Date |

Please turn completed application into Brenda Hayes in the Psychology office HSB 241

*\*If you are requesting over $375, you must apply for a MSSU Student Research Grant to be considered for this funding.*