WiSE Research Award Application
Department of Psychology, Appalachian State University

(You must submit a hard copy of this application with any necessary supporting information.)

To be considered, this application and supporting information must be returned to the Department of Psychology office by 5 pm on the day of the deadline (listed in criteria).

This application is… for an **INDIVIDUAL**. for a member of a **GROUP**.

Name:______________________________________  ASU Box: ___________________

e-mail: _____________________________________  Phone: _____________________

Class standing (circle one):  Fr.  Soph.  Jr.  Sr.  Grad.

Are you in good academic standing?  Yes  No

Faculty collaborator/supervisor:_________________________________________________

If you are part of a group of students applying for this grant award, please list the names of other group members. Only one application form should be submitted for any one project. The student named above will be considered the primary student investigator on the project.

Other group members:________________________________________________________
________________________________________________________________________

Title of project: _____________________________________________________________
________________________________________________________________________

Has the project been approved by the Institutional Review Board/Institutional Animal Care and Use Committee (IRB/IACUC; you must attach proof of approval)?  Yes  No

Please provide a brief description of the project.
#1 Please list the resources/items needed to conduct/complete the project.

<table>
<thead>
<tr>
<th>Resource/Item</th>
<th>Cost</th>
</tr>
</thead>
</table>

Total cost: $ __________

#2 List other sources of support (not including personal funds) available for the project.

Total amount: $ __________

#3 Please list the resources/items YOU ARE REQUESTING for the project.

<table>
<thead>
<tr>
<th>Resource/Item</th>
<th>Request</th>
</tr>
</thead>
</table>

Total request: $ __________
(typical range is $100 – $300)

IMPORTANT! You must attach a 1 page narrative describing the project goal(s) and methods. You must also attach proof of IRB/IACUC approval. Finally, you must attach the collaborating/supervising faculty member’s support form. This application must be returned by the deadline. **No incomplete applications will be considered.**

I certify that the information provided in this application is accurate.

______________________________________________  __________________
Student’s signature  Date

I certify that the information provided in this application is accurate.

______________________________________________  __________________
Faculty member’s signature  Date
WiSE Research Award Faculty Support Form
Department of Psychology, Appalachian State University

(The student must include this form with her or his application.)

To be considered, the application and supporting information must be returned to the Department of Psychology office by 5 pm on the day of the deadline (listed in criteria).

Faculty member name: _______________________________________________________

e-mail: _____________________________________  Phone: _____________________

Student’s(s’) name(s): ________________________________________________________

Please answer the following question (use this form—front and back or attach an additional sheet if necessary).

Briefly describe the nature and significance of the project, your role and the student’s role on the project, the student’s ability to fulfill his or her role, your interaction with the student on the project, and the importance of the project for the student’s goals.