Association of Retired Faculty Graduate Project/Thesis Award Application 2018

The purpose of the award is to recognize and provide financial support to graduate students for excellent scholarship and creative activity. Awards of $2,000 each are made to support ongoing projects and theses that are part of a master’s program. In the following application directions, a “project” refers to either a Master’s Project or a Master’s Thesis.

**Application Procedure\***

Submit a Project Title, Short Abstract (150 words or less), and Summary Description of not more than four pages, single-spaced in 12 pt font, with one-inch margins. The application must include an abstract and selected scholarly citations relevant to the proposal; these may be included in the body of the application or as an attached list.  (The abstract and attachment will not be counted in the four-page application limit.)

1. In the Summary Description, address each of the following criteria:
* State the purpose of the project and the method of achieving that purpose.
* Show that you have the necessary skills for the project.
* Present evidence that you will achieve the project’s purpose.
* Give a realistic timeline for completing the project and state what you have accomplished so far.
* Demonstrate that your project is significant *in your field*.
* Write your proposal in language understandable to an educated lay person (avoiding jargon or highly technical terms unique to your field).

Two or more students working on the same project may apply for an award, submitting one application. If a joint project is chosen for an award, the money will be divided and one presentation will be given.

*Failure to follow these guidelines will result in your proposal not being considered.*

1. Submit two letters of recommendation in support of your project and of yourself. One of them must be from the CSUN faculty member supervising your project. The author of each letter must provide **an original and one copy** sealed together in a single envelope and signed across the envelope’s seal by the letter’s author.
2. You must agree to attend ARF’s Annual Awards Brunch on Saturday, May 12, 2018, and to present a brief description (10 to 15 minutes) of your project at that time.

Submit your application (**original and one copy**), and letters of recommendation to the Office of Research and Graduate Studies, attention Dr. Diane Schwartz, ARF Awards Committee Chair, Mail Drop 8222 or hand deliver them to University Hall, Room 275, no later than March 16, 2018 by 5:00 p.m. For any other questions concerning this award or application procedure, contact the ARF Awards Committee Chair by email at diane.schwartz@csun.edu

\*If you wish, you may also submit as an addendum a portion or sample of your project not to exceed five double-spaced pages. Should you wish to have your portion or sample returned, you must make arrangements with Dr. Schwartz at the above email address.

Association of Retired Faculty Graduate Project/Thesis Award Application 2018

Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student I.D. # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Two individuals writing letters of recommendation:**

1) Professor supervising your graduate project or thesis

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus mail drop \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) Second referee

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus mail drop \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if not CSUN) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*If two or more students are submitting one proposal, duplicate the top section of this form and provide information for each student.*