

Instructions for Completing the Fall 2020 Undergraduate Student Research Proposal Form

1. **Student Name:** Enter your first and last name.
2. **Student ID#:** Enter your assigned 9-digit student ID#.
3. **Student E-mail:** Enter your assigned Penn State e-mail address.
4. **Major:** Enter your declared or intended major.
5. **Current Semester Standing:** Enter your current semester standing. (i.e. 1st, 2nd, 3rd, etc.)
6. **Minor:** Enter your declared minor, if applicable.
7. **Schreyer Honors College:** Select **Yes** if you are enrolled in the Schreyer Honors College. Otherwise, select **No**.
8. **Previous Funding Received:** Enter the semester and year that you have previously received funding through the Office for Undergraduate Education, if applicable. Otherwise, enter **No**.
9. **Research Project Title:** Enter the title of your research project.
10. **Faculty Research Adviser:** Enter the name of your Faculty Research Adviser.
11. **Faculty Adviser E-mail:** Enter your Faculty Research Adviser's Penn State e-mail address.
12. **Department:** Enter your Faculty Research Adviser's academic department. This is the department that will be hosting your research.
13. **Amount Requested from College:** Enter the amount of funding being requested from the College, not to exceed \$1,750. **This amount must match the Amount Requested from College field on your Budget form.**
14. **Fixed Unit Contribution:** Required Unit Contribution is \$250. This field cannot be edited.
15. **TOTAL REQUEST:** This field will automatically populate with the total of the Amount Requested from College and Unit Contribution. This field cannot be edited. **This amount must match the Total Amount Requested field on your Budget form.**
16. **STUDENT SIGNATURE:** You must **sign** the proposal. ****Ink signature or genuine Electronic Signature accepted.****
17. **Date:** You should enter the date you sign the proposal.
18. **FACULTY RESEARCH ADVISER SIGNATURE:** Your Faculty Research Adviser must **sign** the proposal. ****Ink signature or genuine Electronic Signature accepted.****
19. **Date:** The Faculty Research Adviser should enter the date they sign the proposal.
20. **DEPARTMENT HEAD SIGNATURE:** The Department Head for the academic department hosting your research must **sign** the proposal. ****Ink signature or genuine Electronic Signature accepted.****
21. **Date:** The Department Head for the academic department hosting your research should enter the date they sign the proposal.

In a Microsoft Word document, compose your responses to questions 1-8 on Page 2 of the proposal form.

College of Agricultural Sciences
Undergraduate Student Research Proposal Form
Fall 2020

DEADLINE: 5:00 p.m. on Friday, May 8, 2020

Submit Research Proposal Form (PDF), Application (Word Document), and Budget Form (PDF) by e-mail to:
 Office for Undergraduate Education at AgUgradResearch@psu.edu

****Proposal form and application document must be typed. Handwritten forms will be rejected.****
INCLUDE: Title of research project, student's name, and page numbers on all proposal pages submitted

Student Name:	1	Student ID #:	2
Student E-mail:	3	Major:	4
Current Semester Standing:	5	Minor:	6
Schreyer Honors College:	7	Yes <input type="radio"/> No <input type="radio"/>	Have you received funding through this program before? If so, when? 8
Research Project Title:	9		
Faculty Research Adviser:	10		
Faculty Research Adviser E-mail:	11	Department:	12
Amount Requested from the College (\$1,750 maximum):		13	
Fixed Unit Contribution (not in-kind):	\$ 250	14	
TOTAL REQUEST:	\$ 250	15	
IMPORTANT TERMS AND AGREEMENT FOR STUDENT AND FACULTY RESEARCH ADVISER: By our <u>signatures</u> below, we attest that this proposal as written is an original student developed work and does not contain in-whole or in-part sections of written material from previously submitted grants, reviews, or published material that would constitute plagiarism. We also understand that failure to appropriately utilize the funds within the semester awarded or significant deviation from the commitments of the proposal could result in the retraction of awarded funds.			
STUDENT <u>SIGNATURE</u> (genuine e-signature accepted):		16	Date: 17
FACULTY RESEARCH ADVISER <u>SIGNATURE</u> (genuine e-signature accepted):		18	Date: 19
Department Head Signature: By my signature below, I understand that my unit will contribute \$250 toward the proposed budget, and that my unit will administer the hiring of the awarded student in accordance with all HR policies and procedures.			
DEPARTMENT HEAD <u>SIGNATURE</u> (genuine e-signature accepted):		20	Date: 21