

HONORS SUMMER RESEARCH STIPEND APPLICATION

APPLICANT INFURMATION	
Name (Full Legal):	Student ID #:
E-mail Address:	Phone Number: ()
Class Standing:	Cumulative Units:
Major:	Cumulative GPA:
Expected Graduation (Term/Year):	
Street Address:	City:
State: Zip Code:	
Are you a U.S. resident? Yes	No
If applicable, what is your VISA Type (chec	cone) F1 Visa J1 Visa H1 Visa
Faculty Sponsor's Department/Area of Reserved Humanities Social Sciences Please list other research funding and/or sciences 1	earch (check one): Physical Sciences Life Sciences holarships are you receiving for this research
4Currently Participating in (check all that ap	
College Honors Departm	
DEPARTMENT	ED ONLY BY STUDENTS ENROLLED IN A L HONORS PROGRAM
Departmental Honors Program:	
Name of Faculty Sponsor:	Campus Phone: ()
Faculty Sponsor's Signature:	Date: