Summer Educational Enhancement Stipend Application 2015

1. Cover Sheet (Please type)

Name ___________________________________________ (Last) ___________________________________________ (First) ___________________________________________ (M.I.)

TUid ___________________________ Phone ___________________________ Temple Email ___________________________@temple.edu

School/College ___________________________________________ Major(s) ___________________________________________

Type of Activity: ______ Study Abroad / Study Away ______ Research Project ______ Internship ______

Project/Program Title ________________________________________________________________________________

Project Dates (mm/dd/yy - mm/dd/yy) ___________________________ Project Hours (#wks * #hrs/wk) ___________________________

Internship or Research Project Supervisor

(Name) ___________________________________________ (Email) ___________________________________________ (Phone) ___________________________________________

Host Institution/Organization ___________________________ City ___________________________ State ______

Does this project involve international travel? ____ Yes ____ No If yes, which country? ___________________________

(Travel to countries under a U.S. State Department Travel Warning is not eligible)

Will you be receiving any additional funding in relation to this project (payment, scholarships, etc.)? ____Yes ____No

(If yes, please attach a description of the funding and reasons for requesting an exception.)

The answers given on this application are correct to the best of my knowledge, I understand and will adhere to the eligibility requirements, and I agree to complete the project as outlined and provide the required end of project report before the start of fall semester.

Student’s signature ___________________________________________ Date ___________________________

APPROVALS

Approving Faculty ___________________________________________ (Print Name) ___________ (Department) ________ (Signature) ________ (Date) ______

____Yes ____No I have reviewed the attached project proposal and approve the project/program.

Dean (or designee) ___________________________________________ (Print Name) ___________ (School/College) ________ (Signature) ________ (Date) ______

Completed, approved applications should be forwarded by the Dean’s Office to: Emily Moerer, Assistant Vice Provost Office of the Senior Vice Provost for Undergraduate Studies, Temple University Conwell Hall 500 (038-23) Philadelphia, PA 19122
2. Project Abstract (100 words max.)
Please provide a brief, description of the proposed project or program. If your project is of a scientific or technical nature, your abstract should include the specific focus and significance of the project in non-technical terms.

3. Project Proposal (500 words max.)
Clearly describe your proposed program, internship or research project; its focus and scope, and significance to your undergraduate course of study and/or professional development; and course work or experiences that have prepared you for this program/project.