

Collegiate Student Development Fund Application

Name: _____

Address: _____

Telephone: _____ Email: _____

Educational Institution: _____

Academic Major (s) and Student Status: _____

Research Project Title: _____

Check One: Poster Presentation Paper Presentation

Attach the following:

◆ **Abstract**

State briefly the objective of the project or study, methods utilized, results and conclusions.

◆ **Letter of Recommendation**

A letter of recommendation from the project advisor or department professor.

Eligibility Requirements:

- ◆ Participants must be MAFS student affiliate members at the time of application submission.
- ◆ Participants must be enrolled in an accredited college or university.
- ◆ Participants must be junior/senior year undergraduates, graduate or doctorate students.
- ◆ Participants must submit a completed application form with abstract by July 15th.

I hereby acknowledge that I meet the eligibility requirements as outlined above and that the information provided is correct. I also understand that I may be contacted by the selection committee for additional information.

Signature

Date