

Summer Research Proposal for Summer Funding  
SUMMER 20\_\_

*Please print or type responses*

Student's name \_\_\_\_\_

Department/program: \_\_\_\_\_

Officially ABD: Yes \_\_\_\_\_ Date ABD: \_\_\_\_\_ No \_\_\_\_\_ Date expected: \_\_\_\_\_

Title of dissertation (if applicable):  
\_\_\_\_\_

Plan for summer research: Be as specific as possible. Attach an additional sheet, if necessary.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_

Approval by faculty advisor (name) \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_