RESEARCH GRANT FORM

Graduate Student Association of Textile and Apparel Management

Date: _____

Name:_____Degree (MS/PhD):_____

Address: _____

Email Address:_____ Student Id:_____

Academic Program and Research Details:

Academic Program:_____

Emphasis:_____

Research.Topic:_____

_____

Estimated Research Expense Summary:

Travel:$_____ ☐ Private vehicle ☐ Air ☐ Other:_____

Data Collection:$_____ ☐ Interview ☐ Survey ☐ Focus Group ☐ Other:_____

Other Research Expense (details):_____

_____

_____ Expense: $_____

Total Cost: $_____

External Funding (estimated):

Source: _____ Estimated allocation:$ _____

Source: _____ Estimated allocation:$ _____

Source: _____ Estimated allocation:$ _____

Total External Funding: $0_____

I have read the Graduate Student Association of Textile and Apparel Management's General Research Grant policies and requirements. I acknowledge that the faculty advisor / faculty reserach supervisor may be accessed as a reference to the validity of my funding request.

Signature _____ Date:_____

Please submit to GSA-TAM Vice-President