

UCLA Department of Spanish & Portuguese
Application for Graduate Student Research Support Funds

Graduate Student Name: _____ University UID: _____

UCLA Email _____

Have you advanced to doctoral candidacy? Month _____ Year _____

Title of Research Project: _____

Proposed dates of research project

FROM: Month: _____ Year _____ TO: Month: _____ Year _____

Have you used any of your funding already? Specify amount and dates.

Amount Requested for this application: _____

(Maximum \$1,000 total over the course of your graduate studies)

Research funds justification: Briefly describe your research project and how the research funds will be used specifically. For experimental subjects, explain the project and what it is designed to test, what task(s) the participants will be doing, how this relates to your graduate study, how many subjects and hours total, etc.

Budget: Provide a breakdown of the expenses and associated costs of your request.

Have you applied (or are you planning to apply) for other research funding support for this project?
Please list below.

Faculty Advisor Signature:

I am aware that my advisee is preparing the project listed above. I have read and approved the proposal.

Faculty Advisor signature: _____ Date: _____

Student Signature:

I have read, understand, and agree to the criteria and policies for the S&P Graduate Student Research Support funds. If funding is approved, I understand that I must first consult with the department staff prior to utilizing the funding to ensure purchases are compliant with UCLA policy.

If my application is approved, I agree to provide the following per the terms of the funding:

- a) Submit a written report of my research activities to my Faculty Advisor and the Graduate Student Advisor within one month of the proposed dates listed in this application
- b) Present on my research activities to faculty and graduate students within one academic quarter after using the funding.

Student signature: _____ Date: _____

Director of Graduate Studies Approval (required before funds are disbursed)

Amount approved: \$ _____

Director of Graduate Studies Signature: _____

Date: _____