# IOWA STATE UNIVERSITY

### **University Honors Program**

# **Default Question Block**

## **Stewart Research Award**

Please fill out this application in its entirety and direct any questions you may have to honors@iastate.edu. Once you complete this application, a copy will be sent to your project/research advisor requesting their review and approval. Please ask them to watch for the message and respond quickly.

The review committee meets approximately I week after the application deadline, and students will be notified of any award within 2-3 days of the committee meeting.

Name (first and last):						

ISU email:  *You may provide only one email address, and it must be correct (no typos or extra spaces) in order for your application to be confirmed.
Address (street, city, zip)
Classification:
O Freshman
O Sophomore
O Junior O Senior
College:
OBUS

IRB or IACUC approval #:
IRB or IACUC approval date:
What is the relationship of this project to your Honors Program of Study?

Please describe recent work, coursework, or background information related to this project:

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What will be done to	share the value of your project with
other students and	groups? What will happen to any
	,
tarigible iterns prodi	uced as a result of the project?

#### **Abstract**

The abstract is the most important part of the proposal. It should be carefully written and well thought-out. It should include:

- Hypothesis or purpose of the project
- Description of the subjects, apparatus, tests, or questionnaires to be used
- Other procedures and methods to be used

- How the data will be analyzed
- Pertinent references
- A statement of what will be done with the results of this project
- A statement of the significance of this project to your discipline and society

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## **Expenses**

Please provide a detailed budget, which includes the

number and types of items and their expected expense. Stewart Grant applicants usually request up to \$750.00.

#### **EXAMPLE**

	Cost of	Stewart	Other	Other	
Item	Item	Grant	Funding	Funding	
	item	Request	Amount	Source	
10 progesterone ELISA	\$1,000.00	\$750.00	\$250.00	LIHP Grant	
plates @ \$100.00 ea.	\$1,000.00	\$730.00	\$230.00	UHP Grant	

	ltem	Cost of Item	Stewart Grant Request	Other Funding Amount
1				
2				

3		
4		
5		
6		
7		
8		
9		
10		
11		

Qualtrics Survey Software

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Please provide your project/research advisor's information below. Once you have completed this application, a copy will be sent to them via email for review and approval. Please ask your advisor to check their email for this request. Once your advisor has signed off, the University Honors Committee will review your application.

Project/research advisor
Name (first and last):
Project/research advisor
Email address:
*You may provide only one email address, and this email
must be correct (no typos or additional spaces) in order
for your advisor to receive a review copy.

Project/	research	advisor
1 101001	1000011011	

Title and department/unit:

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Please upload a **letter of support** from your project/research advisor addressing the quality of the proposed research and your ability to carry out the project.

## Block 1

This completes the application. When you click "SUBMIT" below, a copy of this application will be sent to your project/research advisor for review and approval.

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