

Graduate Student Research Award Application Cover Page

Project Title:			
Total Budget Request:			
Student Name: CSU ID: Email	l :		
Number of Graduate Credits Completed: Graduate GPA:			
Name of Graduate Program:			
Check the Appropriate Box: ☐ Master's Student ☐ Doctoral Student			
Name of CSU Advisor:			
Have you submitted a GSRA application before this year?		Yes	□ No
Does the proposal contain confidential or proprietary information?		Yes	□ No
Does the proposal include all of the required sections as specified in the funding guide	elines?	Yes	□ No
Has the entire proposal (including this cover page) been assembled into a single PDF?		Yes	□ No
I certify that the activities described in this proposal will be conducted in accordance of funding program and other University regulations.			
Student Signature: Date:			-
I certify that the departmental resources described in this proposal will be made availa	ble for the	propose	d activities.
Department Chair Signature: Date:			
I certify that the applicant is a graduate student who is making satisfactory progress to graduate program requirements.			
Graduate Program Director Signature: Date:			