



STUDENT GRANTS APPLICATION

Name : _____

University : _____

Address : _____

Email : _____

PhD/Master Program : _____

Semester : _____

Source of Funding/Scholarship : _____

Thesis/Dissertation Title : _____

Conference Title : _____

Paper Title : _____

List of Authors : _____

Please include a statement below of recommendation from your advisor. In addition, the statement should verify full-time status, status of thesis/dissertation and state whether or not other sources of funding are available:



STUDENT GRANTS APPLICATION

Student signature

Date: _____

Supervisor's signature with stamp

Date: _____

Please print, scan and e-mail this completed form to gmrsubmission@gmail.com by the deadline.