

FACULTY SPONSOR
EASTERN ILLINOIS UNIVERSITY
UNDERGRADUATE RESEARCH AND CREATIVE ACTIVITY PROPOSAL

Name of Student Sponsored _____

Name of Faculty Sponsor _____

Department _____

Briefly provide your comments about the student's proposed research or creative activity, including an assessment of the validity of the project design.

Explain why you believe the student will be successful in carrying out this proposed project, bearing in mind that the student is primarily responsible for the actual execution of the activity and preparation of the Summary Reflection. Please include comments on the student's communication skills.

Please specify the account name and number into which faculty funds are to be deposited. *Cannot be a gift account*

Organization # _____ Organization Title _____

I understand that the funds awarded by the Undergraduate Research Council are for the exclusive use of the above named faculty member.

Department Chair Signature

Date

By signing this application, I agree to supervise the student, the proposed project, and monitor the ethics used in the proposed research. I also understand that the Undergraduate Research Council requires the student to submit a summary report of his/her research to the Honors College Office.

Faculty Sponsor Signature

Date

Return this application to:

Dr. Richard England, Dean of The Honors College, Eastern Illinois University, Charleston, IL 61920.

*****Note: It is the student's and the sponsor's responsibility to submit the summary reflection by the deadline. Failure to do so will result in the refusal of future undergraduate research grants for the applicant.*****