

VERMONT SPACE GRANT CONSORTIUM

COVER PAGE - 2016 GRA COMPETITION

Name and Title of Faculty Applicant:

Project Title:

Faculty Address:

Faculty E-mail:

Phone number:

Faculty Department(s) (if not part of address):

Name of Graduate Student:

Degree Program (Please Check One): MS \_\_\_ Ph.D. \_\_\_

Area(s) of Interest for NASA:

Signatures:

Faculty Advisor:

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Print Sign Date

Department Chair:

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Print Sign Date

Checklist: COMPLETE APPLICATION DUE BY 5:00 p.m. on March 18, 2016:

1. Cover Sheet \_\_\_
2. Project Narrative (4 pages max) \_\_\_
3. NASA Relevance \_\_\_
4. Student Mentoring Plan \_\_\_
5. Student C.V./resume (1 page) \_\_\_
6. Student transcript \_\_\_

The complete application must be saved as a single PDF file and emailed to the Space Grant Office to Ms. Debra Fraser ([dfraser1@uvm.edu](mailto:dfraser1@uvm.edu)) with CC to Director Darren Hitt ([SG.Director@uvm.edu](mailto:SG.Director@uvm.edu)).