

VERMONT SPACE GRANT CONSORTIUM

COVER PAGE -- 2009 GRA COMPETITION

Name and Title of Faculty Applicant:

Project Title:

Faculty Address:

Faculty E-mail:

Phone number:

Fax 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 Member:

Print	Sign	Date
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Department Chair:

Print	Sign	Date
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Checklist: COMPLETE APPLICATION DUE BY 4:00 p.m. on March 30, 2009:

1. Hard Copy to Space Grant Office (Pearl House, Second Floor, Room 209, 12 Colchester Avenue, Burlington, VT 05401-1455) by 4:00 PM, March 30, 2009:
 - a. Completed Cover Sheet with PI and Chair Signatures ___
 - b. Student Transcript ___

2. Proposal Packet -- Hard Copy to Space Grant Office and Electronic File as Email Attachment to wlakin@together.net by 4:00 PM, March 30, 2009:
 - a. Three Page Project Description ___
 - b. Section With Evidence of NASA Interest ___
 - c. Section on Student Mentoring ___
 - d. Two Page Faculty C.V. ___
 - e. List of All Current and Pending Support ___
 - f. One Page Student C.V. ___
 - g. Student course plan and related requirements ___