GULF COAST ASSOCIATION OF GEOLOGICAL SOCIETIES

APPLICATION FOR STUDENT RESEARCH GRANT

DEADLINE: FEBRUARY 15, 2018

| Name: | | | |
|---|--|---|---|
| School: | | | |
| Applicant's Mailing Address: | | | |
| Day Phone: | Fax: | | E-mail: |
| Candidate for: | Bachelor's Degree | Master's Degree | Doctorate |
| If Graduate, from what scho | ool(s) did you obtain your Bache | elor's and Master's Degrees | ? |
| (B): (M): | | (M): | |
| Title of proposed thesis or o | lissertation: | | |
| Name of Project Supervisor Estimated date of completic THE FOLLOWING MUST E 1. A TWO-PA 2. AN ESTIMA 3. A LETTER | on of thesis or dissertation: BE INCLUDED WITH THIS APPOSAL IN ENGLISH OF EXPENSES OF ENDORSEMENT FROM Y | PLICATION: OUTLINING YOUR RESEA OUR PROJECT SUPERVIS | |
| progress report on my fun one year following completion | ded research within one year a on of my degree, a paper relati | fter receiving the grant. Als ng to this research to the Go | mmittee Chairman a one-page o, it is my intent to submit, within CAGS Technical Program Chairman eations resulting from this research. |
| Signature of Applicant: | | Date | |
| Signature of Supervisor: | | Date: | |
| Submit in hard copy to: | Brian F. Platt Department of Geology ar 120A Carrier Hall University of Mississippi University, MS 38677 | nd Geological Engineering | |

All application materials must be received by Brian Platt no later than February 15, 2018.

For information, contact Dr. Platt at: Phone: (662) 915-5440 Fax: (662) 915-5998

Email: bfplatt@olemiss.edu or visit the GCAGS website (www.gcags.org).