

Southwestern Association of Toxicologists Student Research Grant Program

Application Instructions

Applications may be submitted for the Student Research Grant Program up to the June 30th deadline for consideration for funding the following fiscal year (July 1-June 30)

- 1. Complete the application in full. Do not submit resumes in the place of an application. Please type or print neatly. Provide your name, address, email contact information and phone numbers where you can be reached throughout the academic year.
- 2. Include a letter of recommendation/endorsement with your application.
- 3. Mail application and supporting documentation to: SAT Grant Committee c/o Melissa Giguere Dallas County Southwestern Institute of Forensic Sciences 2355 N. Stemmons Freeway Dallas, TX 75207
- 4. **Deadline for application is June 30th.** Applications received after June 30th will not be considered for the current fiscal year cycle.
- 5. Award notification will be announced in late July.

Individuals selected to receive the SAT Grant will be contacted by the SAT Grant Committee Chair concerning delivery of their grant. The selected students must provide either an address where a check can be sent or all the banking information necessary for the wire transfer of the grant, including the appropriate bank account in the name of the student recipient. **The grant funds cannot be sent to a third party or wire transferred to a third party's account.**



Southwestern Association of Toxicologists Student Grant Program Application

Section A (to be completed by the applicant)

Name:				
	Last First			M.I.
Address:	<u></u>			
	Street			
	City	State		Zip Code
College or	University:			
Address:				
	Street			
	City	State		Zip Code
Academic of	legree currently pursu	uing? Bachelor's	Master's	·
Degree fiel	d?			
Employer (if applicable):			
Address:				
	Street			
	City	State		Zip Code

Section B (to be completed by applicant's academic advisor or supervisor)

Advisor's/S	upervisor's Nam	ne:	
Organizatio	n:		
Address:			
	Street		
	City	State	Zip Code
Telephone:		E-mail:	

1. Please comment on applicant's academic work and/or their project proposal.

2. Describe the student's commitment to the field of forensic sciences and forensic toxicology.

3. Additional comments.

Signature:	
-	

Title:	

Section C (to be completed by the applicant)

1. What are your career goals and why did you choose this particular career field?

- 2. Title of project proposal:
- 3. Narrative of proposed project (250 words of less; should contain the research objective, statement of benefit to Toxicology/Forensic Science, related research with citations, budget and target completion date)

Applicant Pledge and Waiver (*must be signed by the applicant before the application will be acted upon*)

By my signature below, I affirm that all of my statements are true, accurate and complete to the best of my knowledge. I authorize the SAT Grant Program Committee to investigate any statements made in this application.

Signature of Applicant: _____

Date: _____

*** Please attach additional sheets if necessary to complete any questions ***