

**STUDENT SUMMER RESEARCH GRANT
APPLICATION COVER SHEET**

Please submit this application form and supporting documents to Velda Yount at vyount@kecksci.claremont.edu, by Friday, February 24, 2023.

Circle which one you are applying for: **Keck Fund**
 Eaton Fund
 Stein Family Fund (SScIP)

Name _____ School _____

Major _____ Current Class: Fr So Jr Sr

Campus Mailing Address _____

Phone _____ E-mail Address _____

Home Address _____
(address should be address on where check is to be mailed)

Home or Cell Phone _____
(without a phone number, we will not be able to process paperwork to produce check)

Proposed Faculty Advisor _____
(advisor should sign below to indicate that the two of you have discussed the possibility of you working in their research group this summer)

With this cover sheet, please submit the following:

- **A statement indicating why you would like to spend the summer doing research. Describe your interests and background in the sciences (previous research experience is *not* required).**
- **An unofficial transcript.**

Finally, are you applying for other summer research programs? _____ If so, please briefly provide the details: _____

Your signature _____ Date _____

Proposed Faculty Advisor Signature _____ Date _____

