Student Research Grant Application

The minimum criteria to apply for KSHA's Research Grants are:

1. Evidence of academic achievement at either or both the graduate and undergraduate level.
2. Transcript showing current GPA (no minimum required) and enrollment in a speech-language pathology or audiology training program.
3. Financial need.
4. KSHA student membership.
5. Professional goals and philosophy.
6. Letters of Recommendation.
7. Institutional Research Board (IRB) approval.

Grant recipient agrees to:

1. Reference KSHA as a grant source when engaging in any media presentation.
2. Present research findings as a poster presentation at the KSHA Convention.
3. Write a comprehensive article for the KSHA Publication the Communicator upon completion of the research study.

Please attach the following documentation to this application form:

1. Transcript to validate your GPA and program enrollment. While there is no minimum GPA required for this application, the GPA will be considered in the selection process.
2. Current résumé showing your academic achievement, employment history and relevant activities at either or both the graduate or undergraduate level.
3. A typewritten 250-500 word essay that includes:
   - Explanation of your financial need;
   - Description of your professional philosophy; and
   - Future plans and goals as a Speech-Language Pathologist or Audiologist.
4. Two Letters of Recommendations written on your school's letterhead. One should be from your Research Faculty Advisor and the second from your Program Faculty. The recommenders should address your financial situation, your ability to complete a graduate program and/or conduct research, or other information relevant to your application.
5. Copy of Institutional Research Board (IRB) approval.

Mail, fax or email completed application and supporting documentation to:
KSHA
Research Grants
838 East High Street, Suite 263
Lexington, KY 40502

Questions to: kshaoffice@ksha.info

Student Research Grant Application

Application & Supporting Documents Deadline: Postmarked by April 1, Awarded May 1. All applications and documents received after deadline date will be disqualified.

Name: _____

Address: _____

Cell Phone: _____ **Email:** _____

Employer: _____

Status:
- ❑ Full-time
- ❑ Part-time
- ❑ Undergraduate
- ❑ Graduate
    - □ First-year graduate student
  - □ Second-year graduate student
- ❑ Doctoral

Previous Degree(s) Earned: _____

Major/Institution/Granted: _____

Please indicate whether you have been a recipient of a KSHA scholarship/grant in a previous year.

❑ First-time applicant
❑ Former recipient
  Year:_____ Amount Received:_____

Are you currently receiving any financial aid/scholarship/grant? If yes, please indicate the amount, type and name of your financial aid/scholarship(s).

_____

_____

_____

I certify that the information provided is accurate, and I understand that providing false information is grounds for denial of scholarship/grant.

Signature/Date: _____

Keep a copy of your application for your records.

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Application & Supporting Documents Deadline: Postmarked by April 1, Awarded May 1. All applications and documents received after deadline date will be disqualified.

Student Research Grant Proposal

University you are attending: _____

Research Faculty Advisor: _____

Research Team/Committee Member Names: _____
_____
_____

Amount requested $_____

Projected Research Completion Date _____

Purpose of your research study, including relevance to the profession:
_____
_____
_____
_____
_____
_____

Itemized list of needed materials and their costs (e.g., videotapes; postage) to be covered by this request:
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Grant Recipient Agreement: If KSHA provides funding for your student research, then you and the research team agree to recognize such support in any presentation or publication pertaining to this research study. The student also agrees to write a comprehensive article for the KSHA *Communicator* upon completion of the research study and present their research findings as a poster presentation at the KSHA Convention.

Student Signature and Date: _____