

**Lipscomb University Undergraduate Research
Application for the Langford-Yates Fellowship**

Both student applicant and faculty mentor should complete this form, obtain Department Chair signature, then submit **as an email attachment** to the Executive Associate Dean (Shanna Ray) at raysd@lipscomb.edu. Applications are due **Monday, November 13th**. Successful applicants will be notified by **February 15**. Only students who have earned a GPA of at least 3.0 are eligible to apply. Successful applicants are expected to present a poster or a paper at the Annual Student Scholars' Symposium.

Faculty Applicant (Mentor) Information

Name _____ Department _____ Email: _____

What benefit(s) might a student researcher gain from working on this project? Check all that apply:

- a. Valuable experience ___ almost certainly ___ possibly
- b. Teaching and mentoring ___ almost certainly ___ possibly
- c. Presenting at a conference ___ almost certainly ___ possibly
- d. Listed as co-author ___ almost certainly ___ possibly
- e. Letter of reference ___ almost certainly ___ possibly

Number of hours the student is expected to work on this project _____

Approximate dates during which the student will conduct research _____

Student Researcher Information

Name _____ Major _____ Academic Classification _____

Email _____ Phone _____ Current GPA _____

Project Information: The student applicant should write a proposal in his or her own words, with faculty help (minor edits only). The proposal should contain the following information:

1. Title of project
2. Literature review that provides context for your study
3. Goals and objectives
4. Research question(s)/Hypotheses
5. Research methodology
6. Expected outcome(s) of your research
7. Significance and value of the project
8. What will be the product of the research (journal article, book, conference presentation, data collection for ongoing study, etc.)?
9. References/works cited

Faculty Mentor Signature _____ **Date** _____

Student Researcher Signature _____ **Date** _____

Department Chair Signature _____ **Date** _____