

### **PART I**

Application for a

### Roger S. Smith Undergraduate Student Research Award Faculty of Kinesiology, Sport, and Recreation

**Submit application** (including unofficial transcripts) to the Office of the Associate Dean Research, Room 3-113, University Hall, <u>ksradr@ualberta.ca</u>, by <u>April 1, 2024 at 4:00 pm</u>.

#### **Personal Data**

Family Name		Given Name		Student ID#			
ACADEMIC BACKGROUND (including ongoing post-secondary degree)							
Degree	Department	Name of	f Discipline	Month/Expected Year of			
				Completion			
At the time of applic	cation, are you attending t	university	?				
Full-Time Part-Time							
How many credits v	vill you have completed to	wards you	ur degree program whe	en this award is held?			
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	PS AND OTHER AW						
Name of Award		Where Received		Period Held (mm/dd/yy)			
OTHER INFOR	RMATION						
I am legally entitled to work on campus.			Yes	No L			
I am planning to be registered in the Faculty of							
Kinesiology, Sport, and Recreation in the Winter Term?  Yes  No							
Current Address			Permanent Mailing Address (if different)				
If current address is temporary, indicate leaving date			Telephone number at	permanent mailing address			
ir current address is temporary, indicate leaving date			recommendation at	permanent mannig address			
Telephone number at current address			Email address				

The information above is collected under the authority of the Universities Act Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act (FOIPP) for the purposes of promoting the work of the Faculty of Kinesiology, Sport, and Recreation at the University of Alberta.



### **PART II**

## Roger S Smith Undergraduate Student Researcher Award Application Form

Proposed Research Project (to be completed by the <u>supervisor</u>)

		T				
Name and Title of Supervisor		Department				
University of Alberta Address		Telephone Number				
		Email				
Title of Research Project		Starting Date				
Briefly describe the specific work the	hat the student will und	lertake, and the benefits to the	student of his/her			
engagement in the research. Detail	how the project connec	ts with your own research and				
the student will gain from taking pa	art in the project. (MAX	XIMUM 200 WORDS)				
SIGNATURE						
I hereby certify that I will be supervising this student in the proposed research and development activities during the proposed period of tenure.						
G*4	Name of C	-1	Dete			
Signature of Supervisor	Name of Supervisor (	piease print)	Date			

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### **PART III**

# Roger S Smith Undergraduate Student Researcher Award Application Form

Proposed Research Project (to be completed by the student)

Outline the Proposed Research Pro	Outline the Proposed Research Project: Include a description of the research project, how the project connects with					
	l work to be undertaken and skills/experience to b	e gained. (MAXIMUM 300				
WORDS)						
CICNIA TUDE						
SIGNATURE						
I hereby acknowledge that the information above is accurate and I agree to abide by the regulations governing this award.						
<u> </u>						
Signature of Student	Name of Student (please print)	Date				

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