

# RESIDENT RESEARCH PROPOSAL

## Title Page

**Project Title:**

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**Applicant Information:**

Name: \_\_\_\_\_

Academic Rank & Department \_\_\_\_\_

Campus Address: \_\_\_\_\_

Campus E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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Applicant Signature

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Date

**Faculty Mentor Information:**

Name: \_\_\_\_\_

Academic Rank & Department \_\_\_\_\_

Campus Address: \_\_\_\_\_

Campus E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_

As Mentor of this project, I have reviewed this resident's proposal for accuracy and completeness.

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Faculty Mentor Signature

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Date

**Statement of Commitment**

This is a statement of commitment of matching financial support for the above titled project. The department of \_\_\_\_\_ at LSUHSC is committed to providing matching financial support for the study as described in the budget.

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Printed Name

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Department Head Signature

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Date