

APPLIED PSYCHOLOGY UNDERGRADUATE PROGRAM
APPLICATION FOR RESEARCH FUNDING

NAME: _____ NYU ID NUMBER: N _____

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

Instructions: Please submit the following to Dr. Gigliana Melzi:

- Independent Research Project Proposal (5 pages max)
- Itemized Budget
- Letter of Support from Research Mentor
(member of Applied Psychology faculty)
- Current Unofficial Copy of Transcript
- Current Resumé or CV

I understand that I am expected to keep all original receipts, and that I might be asked to submit them at a later date.

SIGNATURE OF APPLICANT: _____ DATE: _____