

Sigma Theta Tau (STT) International Zeta Omicron Chapter Proposal Application

1. Application for: Innovative Project Award Research Award

2. Applicant Contact Information

Name : _____ e-mail : _____

Address : _____

Phone: (cell): _____ (home): _____

3. Applicant Education or Worksite

I am presently: A student An employee Both a student and an employee

School information:

_____ Presently in Semester #___ of #___ semesters
Current school name

AND/OR...

Work information:

Brief description of work responsibilities:

Current employer name

Current position

4. Are you a current Sigma Theta Tau International member? Yes No

5. **Statement of Support:** Please include a short typed or handwritten comment *in the space provided here* from a nursing colleague, supervisor, or faculty advisor (signed with credentials and title) that reflects support for the applicant's proposed **Innovative Project** or **Research Award** request and feasibility of project completion. (See proposal guidelines).

Submit all materials by regular mail, FAX, or e-mail post-marked/dated by **Midnight on February 1, 2012** to:
STT Awards, c/o Zeta Omicron, Gunter Hall Campus Box 125, UNC School of Nursing, Greeley, CO 80639 (FAX 970.351.1707), For questions, call 970.351.2293.