OUTSTANDING GRADUATE RESEARCH IN PSYCHOLOGY AWARD
(Deadline is February 15, 2013)

Name: 

Title of Project: 

Authors on Project: 
(please provide authors’ names in order they will be listed on project)

Academic Standing (please check one):

_____ Master’s Level
_____ Doctoral Level

Status of Project (please check all that apply and supply necessary information):

Completed: _____

Submitted for Publication: _____ (if so, where __________________ )

Published: _____ (if so, where __________________ )

Submitted for Presentation: _____ (if so, where __________________ )

Presented: _____ (if so, where __________________ )
(attach additional sheets, if necessary)

Major (or Supervising) Professor’s endorsement for award:

________________________________________

Please attach a 500 word (maximum) typed summary of the project. Be sure to include the purpose, the methods, and summary of results (if available).

Please submit forms to: Eric Dahlen, Ph.D.
Chair, Awards Day Committee
The University of Southern Mississippi
118 College Drive #5025
Hattiesburg, MS 39406-0001

Please be sure to completely fill out the back of this form
Southern Miss Student Recognition Form
(Please print legible or type)

ALL SPACES MUST BE COMPLETED

It is the responsibility of the school/college/organization sponsoring awards to furnish the requested information.

AWARD TO BE PRESENTED

DESCRIPTION OF AWARD

By (Department/School/College/Organization-Not Southern Miss)

(Please Indicate)
Mr. Mrs. Ms. Miss

Student's FULL NAME last first (NO NICKNAMES) middle (NO INITIALS)

Preferred Name ____________________________

E-Mail Address ______________________________

[ ] Male [ ] Female Social Security # ____________ Empl ID # ____________ Date Of Birth ________

College Enrolled In __________________________ Major __________________________

Example: Education and Psychology

Current Honors College Member? _____Yes _____No Varsity Team Member _____Yes _____No

Sport Participating in __________________________

Classification: Freshman _______ Sophomore _______ Junior _______ Senior _______ Grad. _______

Phone Numbers

Campus Phone ________________________________ Home Phone ________________________________

Campus Box or Local Address __________________________________________________________________

City __________________________________________ State __________________________ Zip ____________

FOR NEWS RELEASE AND INVITATION

Indicate name of parents or spouse: __________________________ (Name) __________________________ (Example: John and Ann Smith)

PLEASE CHECK BELOW: __________________________ (Street)

Parent____Spouse____

Dr. _____ Mr. _____

Mrs. _____ Ms. _____

(City) __________________________ (State) __________________________ (Zip)

Student's Hometown (if different from above) __________________________

If the award is a school/college award, it is the responsibility of the Dean's office. PLEASE RETURN ALL FORMS AT ONE TIME BEFORE THE DEADLINE.