** THE UNIVERSITY OF SOUTHERN MISSISSIPPI**

 **DRAPEAU CENTER FOR UNDERGRADUATE RESEARCH**

 **Eagle Wings Program for Undergraduate Conference Travel MENTOR RECOMMENDATION**

|  |  |
| --- | --- |
| Mentor’s Name  |       |
| Title/Position |       | Department |  |
| Email |  | Empl Number |  |
| Student’s Name |  |
|  |
| **Statement of Support***Clearly summarize your support for the proposed travel. Discuss in specific ways how it will benefit the applicant and his/her academic and professional development. Also address the appropriateness of the proposed venue.* |
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**Faculty Agreement**

I understand that:

* If my student is accepted into the Drapeau Summer Research Grant Program, I will provide regular mentoring and advice for the project, preparing my student to give an effective presentation at the proposed conference.
* I understand that the funds will be placed in my DE account and I will be responsible for overseeing that their disbursement follows university policies and procedures.
* My student will expend the budget as outlined in the application.
* My student will submit a two page report concerning his/her presentation and benefits gained from the conference experience to DCUR within two weeks of returning from the conference.
* I understand that if my student does not fulfill the requirements associated with the Donald Drapeau Summer Research Grant Program that this may affect my ability to have students sponsored in the future.

Typed Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_