SURF CoverPage

☐ **Check this box to be considered for the Mahlon Martin Fellowship.** I certify that I am African-American.

1. **Name of Student** _____

2. **Student SSN** _____

3. **Eligibility of Student** _____ **U.S. Citizen** _____ **Permanent Resident Alien**

4. **Name of Faculty Mentor** _____

5. **Name of Applicant's Institution** University of Arkansas at Little Rock

6. **Permanent Mailing Address and Telephone Number for:**

Student	**Mentor**
_____	_____
_____	2801 S. University Avenue
_____	Little Rock, AR 72201
(___)_____	( ) _____

7. **Email address** _____ **Email address** _____

8. **Title of Project** _____

9. **Academic Department** _____

10. **Degree Sought** _____

11. **SURF Budget (Complete SURF Budget Justification Form & attach to application) Budget Categories**

	Enter amount below
Student Stipend **(cannot exceed $1,250)**	
Mentor Cost **(cannot exceed $750)**	
Student Travel Cost **(cannot exceed $750)**	
Total SURF Grant applied for by Student & Mentor **(cannot exceed $2,750)**	
Institutional Match **(cannot exceed $1,250)**	
Total SURF Project Costs (cannot exceed $4,000)	

Signatures of authorizing official and mentor denote that these individuals understand the guidelines for this program and that the institution agrees to provide or obtain half the student's stipend. In addition to existing university funds, federal and state government, nonprofit agencies, private corporations, individual citizens, etc., are sources that can be accessed for the matchrequirement.

11. _____ _____

Mentor Signature **Authorizing Institutional Official**

Dept _____ **Title** Director, Office of Research and Sponsored Programs

Date _____ **Date** _____