

UC SECRETARIAT
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UNIVERSITY CONSORTIUM YOUNG RESEARCHER GRANT APPLICATION FORM

I. GE	ENERAL INFORMATION	
1.	Name of Applicant (Lead Proponent)	Attach
2.	Gender:	Recent Photo
4.]	Home address:	Here -
5.	Contact No.: 6. Email address:	
7.	Nationality: 8. Highest Degree Earned: 9. Date Attained:	
10.	Area of Specialization:	
11.	Position Title/Academic Rank:	
12.	Home Institution:	
13.	Address of Home Institution:	
II. DI	ETAILS OF RESEARCH PROPOSAL (Use separate sheets if necessary)	
1.	Research Title:	
2.	Rationale:	
3.	Amount Requested from the University Consortium:	
4. 5.	Period of conduct of research (inclusive dates): From Collaborators:	To:
٥.	Name & Designation Institution	Email address
III.	DOCUMENTS ATTACHED (pls. check)	
	☐ Curriculum Vitae of lead proponent and collaborators	
	☐ A copy of the research proposal with rationale, objectives, expected output/outcitem budget, schedule of activities	ome, line-
	\Box Certificate or proof of financial support from other sources, if any	
Applicant's	s Signature: Date filed:	
Endorsed b	y:Name/Signature of UC Coordinator	