Richard W. Woodcock Dissertation Research Award Application Form

Please consult the Award Program Information and Application Instructions website for eligibility requirements and specific information before submitting an application.

Name: ________________________________________________________
(Last Name, First Name, Optional Middle Name or Initial)

Preferred Mailing Address (Street):
_______________________________________________
_______________________________________________
(City, State, ZIP): ________________________________

Daytime Phone Number(s): ________________________________

Preferred E-mail Address: ________________________________

Name of University/College: ________________________________

Name of Department: ________________________________

When was your dissertation proposal approved by your committee? ____________
(Month, Day, and Year)

My signature on this form indicates that I meet all eligibility requirements for this award.

Applicant's Signature: ___________________________ Date: ___________

SUBMISSION DEADLINE:
Complete applications may be submitted any time after September 15 of each year. Applications will be considered until the award funds have been granted for each year (September 1 – August 31st).

Voluntary information:

Gender: ______ Race/Ethnicity: ________________ Disability: ________________
DEPARTMENTAL ENDORSEMENT:

In addition to the required letter of recommendation written by the applicant’s professor or advisor, this section MUST include the original signature of the Chair or Head of the Department (the signature may not be a photocopy).

DEPARTMENT CHAIR - PLEASE NOTE: No more than one application per year may be forwarded by each program for consideration. This signature certifies that the applicant is a student in good standing and has had their dissertation proposal approved by their dissertation committee.

Signature: ________________________________ Date: __________

Printed Name: Title/Position: Email Address:

________________________________________________________________________
________________________________________________________________________

AREA OF PSYCHOLOGICAL RESEARCH:

Select the one area of psychology that best describes your research using the following list. Please indicate only one category:

___ aging/gerontology
___ basic learning/memory
___ behavioral neuroscience
___ biopsychology
___ clinical - adults
___ clinical - children
___ cognitive psychology/neuroscience
___ educational/school
___ exercise/sport
___ forensic/legal
___ health
___ neuropsychology
___ perception/motor performance
___ psycholinguistics
___ psychopharmacology
___ quantitative/computational
___ social/personality
___ substance abuse/addictions
___ other (please specify) __________