

## UNDERGRADUATE RESEARCH AWARD AGREEMENT

	Please fill out fo	or WSGC Grant Re	eporting and Award Payout Purpo	ses Only		
Last Name		First Nam	First Name		Student ID #	
Address		City	City		Zip Code	
Institution			Program/Project Title			
			$\times$			
Program/Project Begin Date			Program/Project End Date			
Space Grant Co Assistance (CFE <u>Required Docul</u> By providing m	ollege and Fellowship P DA) number for this aw ments y initials, I am confirmi Save each document	oursuit of your sprogram: NASA Trand is 43.008.  Ing the completing the completing the Letter – <b>UGR16</b> _	rms and Conditions  pace-related research and/or a  raining Grant #NNX15AJ12H. C  ion and submission of the following professional photo as a .jpg w  Last Name, First Name Award  ne W9	atalog of Fe wing five (5 with the fol	ederal Domestic ) documents to the lowing titles:	
	Media Release Form One-paragraph Biog	<u>n</u> UGR16_Last graphy – UGR16	Name, First Name Media Relea _Last Name, First Name Bio GR16_Last Name, First Name I			
			: I have read the additional req	uirements a	and am committing	
	Submit a Proceedings Paper for the Wisconsin Space Conference online journal within 30 days of the Annual Wisconsin Space Conference.					
☐ Follow	Follow Wisconsin Space Grant Consortium on the WSGC <u>Facebook</u> or <u>Twitter</u> , posting at least one photo or video of my funded Program/Project.					

	Write my Congressional <u>Senators</u> and <u>Representative</u> a <u>Thank You note</u> for this publicly funded award. Provide WSGC with copies and links to any publications highlighting the research associated with this Program/Project award.  Inform WSGC <u>Program Office</u> immediately of any changes in address, phone number, department, advisor, institution, graduation date, etc. <u>Annual Tracking Survey</u> . This survey will be emailed to me by NASA.			
Payout/	Reimbursement			
The Undergraduate Research Award is a student stipend. The award will be sent directly to the awardee. The awardee will receive the award in one installment within 60 days of the award acceptance submission deadline.				
Award r	nt Tax Information ecipients assume the responsibility for any and all income tax liabilities. WSGC recommends that you ent all expenditures, and maintain a record of all original receipts. Contact your tax accountant if you have stions.			
<u>Citizens</u> All fund	hip ed participants (students and faculty) and those receiving significant awards must be U.S. Citizens.			
<u>Award Details</u> More award information is available at <u>spacegrant.carthage.edu</u> under <u>Student Tools and Tips</u> .				
As acceptance of this award, I understand & agree to the above award terms and conditions and acknowledge I am a U.S. Citizen. I also understand that I may be required to return funding if I fail to meet these conditions.				
Signature	Date			