

## **SUBMISSION CRITERIA**

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Applications will be reviewed by the Education Scholarship Committee. The following are minimum requirements for consideration of the application:

- The candidate must be pursuing a **masters or doctoral** thesis at an accredited university and must be a full-time student.
- The Education Scholarship Committee must deem the student's work of sufficient quality to merit an oral or poster presentation.

A completed application **must** include:

- The completed "ASPE Scholarship Grant Application" form.
- The abstract that you submitted (or authored) for the 34th ASPE Annual Meeting
- A statement describing your current research and academic accomplishments and your career plans in precision engineering
- The reference report filled in by the student's advisor.
- A letter of recommendation letter from the student's advisor.

The completed application is due on or before **June 30, 2019** and should be e-mailed to ASPE at [executive@aspe.net](mailto:executive@aspe.net)

## **APPLICANT INFORMATION**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Institution you are currently attending: \_\_\_\_\_

Degree Seeking: \_\_\_\_\_ Field of study: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_ Previous Educational Institution: \_\_\_\_\_

Degree Received: \_\_\_\_\_ Field of Study: \_\_\_\_\_ Year Awarded: \_\_\_\_\_

## **ADVISOR INFORMATION**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**MANUSCRIPT SUBMISSION INFORMATION**

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Manuscript Submission Abstract ID Number: \_\_\_\_\_

Paper Title: \_\_\_\_\_

Co-Authors of Paper: \_\_\_\_\_

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**RESEARCH & ACCOMPLISHMENTS**

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Please provide a brief written statement describing:

- (a) Your current research and academic accomplishments.
- (b) Your career plans in precision engineering.

Please submit this information on a separate piece of paper.

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**I certify that all information provided in this application is true and correct to the best of my knowledge.**

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_