



Term/Year:		Start Date:	End Date:		
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SECTION 4 – Health Insurance Information	
Did you purchase health insurance for this award year?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Insurance Source:	<input type="checkbox"/> Academic Institution <input type="checkbox"/> Private/Other
Was SMART funding sufficient to cover the insurance cost?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Please state the cost of your health insurance for this award year.	

SECTION 5 – Employment Information	
Did you accept employment this award year?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Is the employment with your SF?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Employer Name:	
Employer Address and Phone:	
Number of Hours per Week:	Dates of Employment:
Description of employment position(s), duties, and reasons employment was accepted:	
Description of employment position and duties:	Description of why employment was accepted:

Is the employment with your SF?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Employer Name:	
Employer Address and Phone:	
Number of Hours per Week:	Dates of Employment:
Description of employment position(s), duties, and reasons employment was accepted:	
Description of employment position and duties:	Description of why employment was accepted:

Is the employment with your SF?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Employer Name:	
Employer Address and Phone:	
Number of Hours per Week:	Dates of Employment:
Description of employment position(s), duties, and reasons employment was accepted:	
Description of employment position and duties:	Description of why employment was accepted:

SECTION 6 – Outside Funding Information	
Did you accept funding outside of the SMART program this award year?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Funding Source:	
Funding Amount Received:	Frequency of Funding (per term/per year):
Description of why outside funding was accepted:	

Funding Source:	
Funding Amount Received:	Frequency of Funding (per term/per year):
Description of why outside funding was accepted:	



Funding Source:	
Funding Amount Received:	Frequency of Funding (per term/per year):
Description of why outside funding was accepted:	

SECTION 7 – Academic Interest

Provide a one-line synopsis of your topic of academic interest: (ex: Computer Science with an emphasis on artificial intelligence and cognitive science)

Summarize the reason for your pursuit of the above topic of interest: (provide answer in paragraph form using a maximum of 1200 characters/approximately 200 words)

SECTION 8 – Professional and Academic Goals

Discuss how your academic and professional goals relate to the mission of your SF. If you are a graduate level participant and your thesis/dissertation research is aligned with the work being done at your SF, please discuss: (provide answer in paragraph form using a maximum of 1200 characters/approximately 200 words)

Discuss how SMART is helping you achieve your academic and professional goals: (provide answer in paragraph form using a maximum of 1200 characters/approximately 200 words)

SECTION 9 – Foreign Travel

Did you participate in any foreign travel this past year? YES NO

Location of Foreign Travel:

Dates of foreign travel _____ Date of Return: _____

Did you participate in a study abroad program this award year? YES NO

Location of Study-Abroad Program:

Dates of Study-Abroad Program: _____ Academic Credits Earned from Study-Abroad Program: _____

Description of why the study-abroad is beneficial to your degree pursuit:



SECTION 10 – Accomplishments

Section Instructions: List accomplishments you have achieved during this award year.

Accomplishment Title:	Date:
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Type of Accomplishment: Community Service Honors/Recognition Patent Presentation Publication Research Other

Summary of Accomplishment:

Accomplishment Title:	Date:
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Type of Accomplishment: Community Service Honors/Recognition Patent Presentation Publication Research Other

Summary of Accomplishment:

Accomplishment Title:	Date:
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Summary of Accomplishment:

Agency Disclosure Notice

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