FSD FOUNDATION FOR SCIENCE

AND DISABILITY, INC.

**Grant program for Students with Disabilities**

**in Graduate Science Degree Programs**

A goal of the FOUNDATION for SCIENCE and DISABILITY is to increase opportunities in science for disabled students. To promote this goal, the FOUNDATION has established a Science Student Grant Fund, available to fourth year undergraduate (who have been accepted to graduate or professional school) and graduate students who have a disability. The students must be United States citizens. Awards of $1000 each will be made to college or university students for some special purpose in connection with a science project or thesis in any field of Mathematics, Science, Medicine, Engineering, or Computer Science. An award could be given for assistive device or instrument, or as financial support to work with a professor on an individual research project or for some other special research need.

Since few grants and rehabilitation grants are given to disabled groups who wish to obtain a graduate degree in the field of science, FSD offers this award only to students who are entering or continuing a graduate Degree in one of the above fields. As part of the application, the student is required to write an essay of about 250 words. The essay should include a description of professional goals and objectives, as well as the specific purpose for which the grant would be used. Two letters of recommendation from faculty members are required, including one from the faculty member who serves or will serve as the student's academic research advisor.

A completed application will include:

1) This form completely filled out.

2) A copy of your official college transcript(s).

3) A letter from your research or academic advisor in support of your request.

1. A second letter from another faculty member.
2. Proof of United States citizenship (passport, birth certificate, etc).

Return this completed form, postmarked or emailed no later than **December 1, 2024,** to the Chair of the Science Student Grant Committee

Dr. Richard Mankin

503 NW 89 ST

Gainesville, FL 32607‑1400

Rmankin1@ufl.edu

# Foundation for Science and Disability

## A Non-Profit, Affiliate Society of the American Association for the Advancement of Science

**Member of Sections G (Biological Sciences), M (Engineering), Q (Education)**

FOUNDATION FOR SCIENCE AND DISABILITY

*SPECIAL GRANT APPLICATION*

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS DURING SCHOOL YEAR:

STREET\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_ E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTHDATE\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE\_\_\_\_\_

HOME ADDRESS:

STREET\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_

NATURE OF DISABILITY:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UNIVERSITIES OR COLLEGES DATES DEGREES, MAJOR, GPA

ATTENDED (NAME, LOCATION)

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RECOMMENDATIONS: Give name and address of the two faculty members who are sending letters of recommendation.

If awarded funds I agree to keep in touch with the Foundation in the future about my progress in school and in my career. At the end of the award period, I will provide a 250-word or longer report on the research progress for the Foundation for Science and Disability Newsletter, and a listing of any publications that result from the research. My name may be published in Foundation records if I am a finalist.

I authorize investigation of all matters contained in this application and release of information by my references as required.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF APPLICANT DATE

Insert 250 Word Summary Here:

Additional Remarks to also include what the funds will be used for, if awarded.

Return this completed form, postmarked or emailed no later than **December 1, 2024,** to Chairman of the Science Student Grant Committee:

Dr. Richard Mankin

503 NW 89 ST

Gainesville, FL 32607‑1400

Rmankin1@ufl.edu