

# **Universities Occupational Health and Safety Education Research Center**

## **Pilot Project Program Application Cover Page**

### **Name**

Name of Organization:

Mailing Address:

Telephone:

Facsimile:

e-mail address:

Names/titles or co-investigators, if applicable:

If you are a student or trainee please complete the following information:

Name of university

Type of program

Degree sought:

Major area of study:

Proposed date of completion:

Name of faculty advisor:

Title of Project:

Total amount of award request:

Have you applied for, or are you receiving other funds for his study?

Has your proposal been submitted to an Institutional Review Board?

If yes, what is the current status?

Signature:

Date: