

**ILLINOIS ATHLETIC TRAINER'S ASSOCIATION, INC.
RESEARCH GRANT APPLICATION**

Print this form, then fill it out and mail or scan it and email it to the IATA Vice President.

**SECTION 1
MUST BE TYPED OR NEATLY PRINTED**

Date: _____

Name: _____

Nature of Position: Full time staff Part time staff Graduate Assistant

Work Address: _____

City: _____ State/Zip Code: _____

Work Phone: _____ Work Fax: _____ Email: _____

Have you ever published or received research funding? Yes No

Proposed Project Title: _____

Please attach a one page description of your project.

Itemized Expenses (Max \$250)

ITEM DESCRIPTION:	COST:

If you are awarded research monies, your signature below indicates that you agree to submit an abstract for possible publication and you will prepare a poster presentation for the annual IATA state meeting or make yourself available to be a speaker at the IATA state meeting.

Applicant Signature

Date