

FORM USRA – FORM 1

<p align="center"> OFFICE OF GRADUATE STUDIES & RESEARCH UNIVERSITY OF THE BAHAMAS UNIVERSITY STUDENT RESEARCH ASSISTANTSHIP SCHEME (USRA) APPLICATION FORM <i>(Update: January 2019)</i> </p> <p align="center"><i>[All forms must be typed. Expand the rows of the form if need to. Incomplete Forms will be rejected.]</i></p>		
A	TITLE OF PROPOSED RESEARCH	
B	DETAILS OF RESEARCHER	
B (i)	Name of Project Leader (Principal Investigator)	ID / Employee Number
B (ii)	<p>Position -- Please tick (✓)</p> <p> <input type="checkbox"/> Professor <input type="checkbox"/> Assist. Professor <input type="checkbox"/> Assoc. Professor <input type="checkbox"/> Lecturer </p> <p> <input type="checkbox"/> Others: </p>	
B (iii)	Faculty / Academic Unit / Centre (Please provide full address)	
B (iv)	Office Telephone No.	Mobile No.
B (v)	E-mail Address	
B (vi)	Date of first appointment with the University of The Bahamas	

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B (vii)	<p>Type of Work Contract (√)</p> <div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <input type="checkbox"/> Permanent </div> <div style="text-align: center;"> <input type="checkbox"/> Contract (State contract expiry date)_____ </div> </div>
C	RESEARCH INFORMATION
C (i)	<p>Research Area -- Please place (✓) to as many as apply</p> <p>A. Studies on Business, Hospitality & Tourism</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Business <input type="checkbox"/> Culinary </div> <div> <input type="checkbox"/> Tourism <input type="checkbox"/> Others (please, specify): </div> <div> <input type="checkbox"/> Hospitality </div> </div> <p>B. Studies on Pure & Applied Sciences</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Chemistry <input type="checkbox"/> Mathematics <input type="checkbox"/> Nursing <input type="checkbox"/> Others (please, specify): </div> <div> <input type="checkbox"/> Environment <input type="checkbox"/> Physics <input type="checkbox"/> Allied Health </div> <div> <input type="checkbox"/> Life Sciences <input type="checkbox"/> Technology </div> </div> <p>C. Studies on Liberal & Fine Arts</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Communication <input type="checkbox"/> Others (please, specify): </div> <div> <input type="checkbox"/> Creative Arts </div> <div> <input type="checkbox"/> English </div> </div> <p>D. Studies on Social and Education</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Education <input type="checkbox"/> Others (please, specify) </div> <div> <input type="checkbox"/> Social Sciences </div> </div> <p>E. Others (not listed in the above category) Please, specify:</p>
C (ii)	<p>Location of Research (Example): Chemistry Lab, Oakes Field Campus, UB, Nassau</p>
C (iii)	<p>Duration of this research (Maximum 12 months)</p> <p>Duration:</p> <p>From (date):</p> <p>To (date):</p>

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C (iv)	Other Student Assistant Researchers				
	No.	Full Name	Student Number	Academic Unit	Academic Programme
	1				
	2				
	3				
	4				
	5				
C (v)	Other research projects that have been completed or are ongoing by researchers for the last three years (if any). Please provide title of research, duration, year commenced and year ending (Please, expand the cells below if necessary.)				
	Title of Research (Project ID if any)		Duration	Start Date	End Date
C (vi)	Please furnish information on related academic publications that have been published by the researcher(s) for the last three (3) years. (Example: Journals, Books, Chapters in books, etc.) Please, expand the cells below if necessary.				
	Title of publication		Name of journals/ books/Vol./Issue/ISBN		Year published

<p>C (vii)</p>	<p>Executive Summary of Research Proposal (maximum 300 words) (Please include the background of research, concise literature review, objectives, research methodology and expected outcomes from the research project)</p>
<p>C(viii)</p>	<p>Detailed proposal of research project</p> <p>(a) Research background including Hypothesis/Research Questions and Literature Reviews</p> <p>(b) Objective (s) of the Research Example: This study embarks on the following objectives: 1. To investigate 2. To assess..... 3. To investigate 4. To make recommendation based on</p> <p>(c) Methodology</p> <p>Please state in the form</p> <p>1. Description of Methodology</p> <p>2. Flow Chart of Research Activities</p>

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	<p>3. Gantt Chart of Research Activities</p> <p>4. Milestones and Dates</p> <p>(d) Expected Results/Benefit</p> <p>1. Novel theories/New findings/Knowledge</p> <p>2. Research Publications</p> <p>3. Specific or Potential Applications</p>
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D	BUDGET				
Please indicate your estimated budget for this research and details of Student Hours.					
	Budget details	Amount requested by applicant			
	Stipend Undergraduate / Graduate Research Assistant <i>Please specify in details the breakdown.</i>	First 6 Months (\$)	Second 6 Months (\$)	Total (\$)	Amount approved by Research Committee (\$) (Please Indicate the overall Budget) (Filled by OSRG)
Details					
	TOTAL AMOUNT				

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E	Declaration by applicant (Please tick, ✓)
	<p>I hereby confirm that:</p> <p><input type="checkbox"/> 1. All information stated here are accurate and original. OSRG and the Research Advisory Committee have the right to reject or to cancel the offer without prior notice if there is any inaccurate information given.</p> <p><input type="checkbox"/> 2. Application of this research is presented to the University Research Grant Scheme (URGS) only.</p> <p><input type="checkbox"/> 3. Application of this research is also presented for the other research grant/s (grant's name and total amount). Please specify: _____</p> <p>Date: _____ Applicant's Signature: _____</p>

F	Recommended by Dean (Please tick, ✓)
	<p>[In the <u>absence</u> of the DEAN the Chair/HOD can sign on behalf of the Dean.]</p> <p><input type="checkbox"/> A. Highly Recommended</p> <p><input type="checkbox"/> B. Recommended</p> <p><input type="checkbox"/> C. Not Recommended (Please, specify reasons): _____</p>
	<p>Comments:</p> <p>Name: _____ Signature: _____</p> <p>Date: _____</p>

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G	Recommended by Research Advisory Committee (Please tick, √)
	<div data-bbox="370 283 430 342"><input type="checkbox"/></div> <div data-bbox="467 283 756 321">A. Highly Recommended</div> <div data-bbox="370 388 430 447"><input type="checkbox"/></div> <div data-bbox="467 388 675 426">B. Recommended</div> <div data-bbox="365 493 425 552"><input type="checkbox"/></div> <div data-bbox="467 493 1008 531">C. Not Recommended (Please, specify reasons):</div> <div data-bbox="467 541 1274 562"></div>
	<div data-bbox="310 611 451 640">Comments:</div> <div data-bbox="310 772 1404 802">Name: _____ Signature: _____</div> <div data-bbox="310 850 690 879">Date: _____</div>
	<div data-bbox="365 919 1398 1010"> <p><i>APPLICATIONS SUBMITTED WILL BE TREATED IN FULL CONFIDENCE. THE DECISION OF THE UNIVERSITY RESEARCH GRANT SCHEME AWARDED BY THE RESEARCH COMMITTEE AND ENDORSED BY THE PROVOST IS FINAL.</i></p> </div>