**FURSCA Research Program Signature Page**

Signature Page for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Student name – please print)

I have read the FURSCA Guidelines for Proposals and agree that I meet the stated requirements. I certify that I am a currently enrolled student at Albion College. **I authorize the Student Affairs Office to release information about my social standing and academic standing to FURSCA’s Associate Director. I understand this information will be used only to verify that I am not on academic or social probation.**

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Graduation Date (month/year):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The applicant must return this completed page to FURSCA’s Associate Director at the FURSCA office, 2nd Floor Old Observatory #204 by the deadline indicated on the FURSCA website.**