Jack Tarver Library
Valerie B. Edmonds Student Research Award 2012

This application cover sheet must be completed by student applicants. For group projects, all members should provide their contact information and signature, using additional pages if necessary.

**Project Information**
Course number and title of course for which project was completed (if applicable):
__________________________________________________________________________________________

Professor's Name: ____________________________  Department: _______________________

E-mail: ______________________  Phone: _______________________

Title of Project:
__________________________________________________________________________________________

By signing below, I affirm that I am the author of the submitted project, research paper, or other writing ("the work") and that the work in no way infringes upon any copyright or proprietary rights. As author, I retain all copyrights in the work, except that I hereby grant Mercer University Jack Tarver Library a non-exclusive, perpetual, royalty-free license to publish any part of the work on the Library's website, in public relations/promotional materials, and in other publications of the Library.

**Applicant (Applicant 1 for Group Project)**

Name: __________________________________   MUID#: _________________

Mailing Address: ______________________________________________________________

E-mail: ______________________________  Phone: ____________________

Major Field (if declared): ___________________________

Expected Date of Graduation: _______________________

Signature: ________________________________________     Date: _____________________
Title of Project: ________________________________________________________________

Applicant 2

Name: __________________________________  MUID#: _________________
Mailing Address: ______________________________________________________________
E-mail: _____________________________  Phone: ______________________
Major Field (if declared): ___________________________
Expected Date of Graduation: _______________________
Signature: _____________________________  Date: ______________________

Applicant 3

Name: __________________________________  MUID#: _________________
Mailing Address: ______________________________________________________________
E-mail: _____________________________  Phone: ______________________
Major Field (if declared): ___________________________
Expected Date of Graduation: _______________________
Signature: _____________________________  Date: ______________________

Applicant 4

Name: __________________________________  MUID#: _________________
Mailing Address: ______________________________________________________________
E-mail: _____________________________  Phone: ______________________
Major Field (if declared): ___________________________
Expected Date of Graduation: _______________________
Signature: _____________________________  Date: ______________________

(Attach a separate sheet if needed for any additional applicants.)