

**SIGMA THETA TAU—GAMMA ZETA CHAPTER
Ruth P. Council Research Grant**

Application

Title of project for which the application is made:

Current status of the project:

What funding from other sources have you received for this project:

Have you ever received Ruth P. Council research funding before? Yes _____ No _____

If yes, please give date(s): _____

How and when do you intend to disseminate the research findings?

Is the applicant a current member of Gamma Zeta chapter? Yes _____ No _____

SUBMIT COMPLETED PROPOSAL TO:

Ruth P. Council Research Committee Director
Gamma Zeta Chapter of Sigma Theta Tau International
University of North Carolina at Greensboro, School of Nursing
P.O. Box 26170
Greensboro, NC 27402-6170