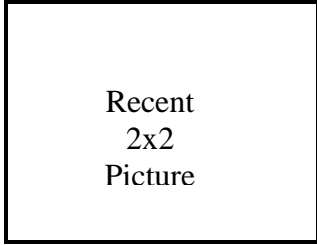


Format  
(please follow this format)



**CHED THESIS GRANT**

1. Name of nominee/applicant \_\_\_\_\_  

(First)
(Middle)
(Last)
2. Date and place of birth
3. Mailing/Office address and telephone/fax number
4. Residence and telephone number
5. E-mail address
6. Civil status (If married, please indicate name of spouse and children)
7. Educational background (Indicate school/university address, degree and year obtained, inclusive dates of attendance, honors/awards received)
8. Present position
9. Subjects currently taught
10. Previous positions in chronological order
11. Title of thesis proposal
12. Discipline of study
13. Degree program
14. Name and address of University/College where the candidate grantee is enrolled
15. Name of Thesis Adviser
16. Work Plan/Time Table

Activities	Expected Date of Completion
Approval of Thesis Proposal	
Data Collection and Encoding	
Data Analysis	
Report Writing	
Expected Date of Defense	
Expected Completion Date of Master's Program	

17. Total Amount and Detailed Budget of Financial Assistance sought from CHED Thesis Grant

Item	Amount

**\* Please indicate other source (s) of financial support including the amount**

18. Thesis Panel/Committee Members (Name and Designation)
19. Awards received (indicate year received and name of awarding institution/organization)
20. GPA in the Course leading to the program applied for
21. Research Publications (Give complete citation and include manuscript in press)
22. Research papers and studies completed or in progress (indicate where or when conducted, date completed or expected date of completion, and include only those not listed in item 20)
23. Membership in professional organizations (indicate position/nature of involvement)
24. Conferences/seminars and extent of participation, i.e. whether as chairperson, resource person, convenor, participant, etc.

This is to certify the correctness of the information presented above.

\_\_\_\_\_  
Name & Signature of the Faculty Applicant  
Date: \_\_\_\_\_

\_\_\_\_\_  
Name & Signature of the School Head  
Date: \_\_\_\_\_

Note: Please submit two (2) copies of the accomplished application form with the following attachments/documents (a) approved thesis proposal including a one page abstract; (b) two recent 2"x2" photographs; (c) letter of recommendation from the thesis adviser; (d) endorsement letter from the applicant's mother institution; (e) photocopy of the latest enrollment/registration form; (f) certification of grades; and (g) approval sheet of the proposed thesis work including comments from the panel.