

Charles Hutchins Educational Grant Application

Place cursor in first shaded box and enter information requested. TAB to continue to the next box.
Completed application may NOT be more than three (3) pages.
If you have a problem with the application, please call 952-920-7682

1. Name:

_____, _____
Last First M F

2. Current mailing address:

Street _____
Apt/PO/Bldg/Suite _____
City/ST/Zip _____

3. Day phone _____

Home phone _____
Email _____

4. Undergraduate degree _____

Name of university _____
Date of graduation _____

Previous graduate school? _____

Degree _____ Date of Graduation _____

5. Graduate degree sought _____

Name of university _____
Expected date of graduation (*Must be after April 1, 2013*) _____

6. Faculty advisor _____

Contact information (*Office phone*) _____ (*Email*) _____

7. Project title _____

8. Thesis project start date _____ **Anticipated completion date** _____

9. Member ID # _____ **Student Chapter** _____ (*not required*)

Submissions are limited to SMTA Student Members. If you are not currently a member, please visit www.smta.org, click on "Membership" to join for just \$5, and check on student member benefits!

10. Why have you chosen to work in the area of electronic assembly/packaging? What personal strengths do you bring to solving your research project?

11. Where would you like to be in your career path five years after you graduate?

Applicants – please include the following required documents*

- Application*** (in 11pt font; single line spacing; maximum 3 pages total)
- One page (maximum) abstract*** (include your name and school on the abstract)
(11 point font, single or 1.5 line spacing) clearly describing the
 - (a) Objectives and
 - (b) Methodology of your thesis research
- Current resume*** (maximum two pages - including publication record)
- Official copy** only of your **graduate school transcript*** (can be mailed directly from Registrar)
- Copy of your **undergraduate transcript***
include official explanation of grading process for all schools outside the U.S.*
- Letter of Recommendation*** from your advisor to the Hutchins Grant Committee

Electronic Signature _____ **Date** _____
Review and electronically sign application; keep a copy for your records.

Print name _____

DEADLINE

All application materials must be received by the Grant Committee on or before

Monday, April 16, 2012

Submit all documents via email in one(1) PDF file to

karen@smta.org

(You will receive an email to confirm receipt of application/documents)

***Official graduate transcripts must be postmarked by the application deadline
and mailed directly from Registrar to:***

SMTA

Attn: Karen Bergseth

5200 Willson Road, Suite 215

Edina, MN 55424

[P] 952.920.7682