I hereby attest that I read and understand the information provided to me, regarding the disbursement of funds for the **2021 – 2022 O.U.R. Research Grant**.

- I understand and agree, by signing below, that the releasing of my first stipend, in the amount of $250 is contingent upon signing this **Terms and Conditions**, a **photo release form**, to **do the CITI training and have at least submitted if not accepted the IRB approval**, as required by my project.
- I understand and agree, by signing below, that the releasing of my second stipend, in the amount of $250 is contingent to the following conditions:

  Enrollment in 12 or more hours in spring 2020 (at Lamar) or provide written justification signed by my mentor(s) and Chair if otherwise.

  __________

  Maintain 2.8 CGPA and 3.0 Major GPA at the end of the spring, 2020 semester or provide justification if otherwise.

  __________

  **Requesting research support by Dec. 1, 2021.** The research support should include the exact quotes (w/ shipping and handling) and a clear item’s description from vendor’s webpage. With this info, the staff of O.U.R. will place requisitions in Cardinal Purch. I am aware that it takes at least 3 weeks from placing my request to O.U.R. till Lamar’s financial department processes it and PO is generated.

  __________

  Presentation of the research work at Lamar UG Research EXPO 2022.

  __________

  Participation at a minimum of four (4) events (such as panel discussions, workshops, conferences, seminars) organized by O.U.R. before April 25, 2022. The list of events does not include the OUR Orientation, OUR Kick-off Day and EXPO 2022, where the presence is mandatory.

  __________

  Submission of the post-grant report on the project’s results, by **April 25, 2022**

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*I have read, understood, and agreed to ALL of the previous conditions set forth concerning the O.U.R. Grant Funds. I understand that failure to comply with any of the previous conditions will affect my eligibility to continue this grant program, and my stipend amount.*

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I have reviewed, understand and agree to comply with the above terms and conditions.

| Recipient’s Name:____________________ | Signature:____________________ |
| Mentor’s Name:____________________  | Signature:____________________ |
| Mentor’s Name:____________________  | Signature:____________________ |
| Mentor’s Name:____________________  | Signature:____________________ |
| Date:___________________________  | Department: **The Office of Undergraduate Research** |
| Signature of OUR Director:____________________ | Date:____________________ |