



Thesis Title	
Point Person	
Mobile Number	
Email Address	
Thesis Adviser and Class	

PERSONAL INFORMATION

Name of Applicants (ID #, Full name, Year and Course)	
Scholarships (Include the names of scholars and type of scholarships)	
Contact Details of Thesis Adviser	
Mobile Number	
Email Address	

INFORMATION ON RESEARCH/THESIS/PROJECT

Department to be submitted to	
Abstract of the Study	



Objective of the Study
(Include Specific Objectives)

Relevance and Impact

Timeline
(In the form of Gantt Chart; Attach Separately if necessary)

Other Information
(Provide links and/or attach files of relevant information to aid the deliberation process.)



BUDGET JUSTIFICATION

Total Cost of Research			
Breakdown of Total Fees (Add more rows if necessary)			
Need	Quantity	Cost per Quantity	Total Cost
Total			
Total Subsidy Request			
Breakdown of Subsidy Fees (Add more rows if necessary)			
Need	Quantity	Cost per Quantity	Total Cost
Total			



Code of Accountability

I hereby certify that all information provided are accurate, true, and valid. I acknowledge that dishonesty will be duly punishable as stipulated in the LS Student Handbook and that, should there be evidence of dishonesty, I/the group will be held accountable for our actions. I acknowledge that the submission of this application form along with the signature signifies my agreement with this stipulation.

Signature

Applicant Name

Year & Course

Cellphone Number