

PROJECT TITLE

[Should encompass the overarching goal of the project and be not more than 80 characters]

By

STUDENT'S NAME

DATE [month, year]

Committee Members:

ADVISOR, Chair, Dauphin Island Sea Lab

ADVISOR, FDA Gulf Coast Seafood Laboratory

NAME, AFFILIATION

NAME, AFFILIATION

NAME, AFFILIATION

NAME, AFFILIATION

ABSTRACT

[Using 300 words or less, summarize the proposed research including a brief background and statement of significance of the research.]

BACKGROUND

[Provide an overview of relevant research in the area of proposed study, including pertinent citations. One page.]

[All citations in the text should refer to be listed using author, date format. Citations with a single author should include the author's name (without initials, unless there is ambiguity) and the year of publication; two authors should include both authors' names and the year of publication; three or more authors should include first author's name followed by "et al." and the year of publication. Citations may be made directly (or parenthetically). Groups of references should be listed first alphabetically, then chronologically. Examples: "as demonstrated (Allan, 1996a, 1996b, 1999; Allan and Jones, 1995). Kramer et al. (2000) have recently shown" ]

## SIGNIFICANCE

[Detail the significance of the proposed research in terms of advancement of scientific knowledge, marine and/or estuarine ecology, and relation to public health. 1/2 page.]

## OBJECTIVES

[Outline specific research objectives for the proposed study. Each objective should include a hypothesis, rationale, preliminary data (if available), detailed experimental design, expected outcome, and alternative strategies. A master's candidate should have 2-3 objectives and a doctoral candidate should have 4-6 objectives. 2-5 pages.]

## LITERATURE CITED

[References should be arranged first alphabetically and then sorted chronologically. More than one reference from the same author(s) in the same year must be identified by the letters "a", "b", "c", etc., placed after the year of publication. For web references, as a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (author names, dates, reference to a source publication, etc.), should also be given.]

## TIMELINE

[Provide a timeline for completion of all objectives in a table format (example below). 1/2 page.]

	Objective 1	Objective 2	Objective 3	Objective 4	Objective 5
Spring 2011	X				
Summer 2011	X	X			
Fall 2011	X	X			
Spring 2012	X	X	X		
Summer 2012		X	X	X	
Fall 2012		X	X	X	X
Spring 2013		X	X	X	X
Summer 2013			X	X	X
Fall 2013				X	X

## PROJECTED BUDGET

[Document anticipated expenses for completion of the research, including laboratory supplies, reagents, and consumables as well as projected travel. When known, travel budget should identify specific meetings.]

## APPROVAL

[Should be a separate page at the end of the document. See form next page.]

### **General Guidelines**

- 1) Font type 12 point Times New Roman should be used throughout, including figure legends, if applicable.
- 2) Line spacing should be 1.5 lines throughout.
- 3) Page margins should be set at 1" for top, bottom, left, and right.
- 4) Page numbers should appear on every page in the lower left-hand corner.
- 5) All figures/graphics/diagrams should be embedded into the word document in .jpg or .pdf format.
- 6) Measurements units should be standardized using SI and expressed in the form  $m s^{-1}$  (not m/s).
- 7) Completed research proposal should be submitted to DISL and FDA advisor by the end of the sixth month in the program. (Fall admission, proposal due February 28; Spring admission, proposal due June 30; Summer admission, proposal due October 31)



**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
Public Health Service

Food and Drug Administration Gulf Coast Seafood Laboratory  
P.O. Box 158, 1 Iberville Drive Dauphin Island, AL 36528-0158 (251) 694-4480

**RESEARCH PROPOSAL APPROVAL FORM**

Date Submitted: \_\_\_\_\_

Student: \_\_\_\_\_  
*Last First MI*

**FDA APPROVAL CHAIN**

Print Name	Signature (required)	Date
1. _____ <i>Committee Chair</i>	_____	_____
2. _____ <i>FDA Advisor</i>	_____	_____
3. _____ <i>MHSB Staff Member</i>	_____	_____
4. _____ <i>CHSB Staff Member</i>	_____	_____
5. _____ <i>Chief, MHSB or CHSB</i>	_____	_____
6. _____ <i>Director, DSST</i>	_____	_____

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_