

Name and Contact Information

Fill out this form, then select the button at the bottom of the page.

\* - Required Information.

Name and Credentials

First & Middle Names or Initials\*  
(Example: Joe A.)

Last Name\*  
(Example: Doe)

Highest Degree  
(PhD, DSW, MSW, BA, etc.)

Contact Information

Is this a Home or Work Address?\*

Institution (Leave blank if using Home address)

Department/Discipline (Leave blank if using Home address)

Street Address Line 1

Street Address Line 2

City\*

State/Province (If US/Canada)\*

Other (enter at right)

Zip/Postal Code (If US/Canada)\*

Country\*

Work/Office Phone Number\*  
Example: xxx-xxx-xxxx

Home Phone Number\*  
Example: xxx-xxx-xxxx

Fax Number  
Example: xxx-xxx-xxxx

Primary Email Address\*

Alternative Email Address

Sigma Theta Tau International Membership Status

Are you a Sigma Theta Tau International Member: Yes No

If Yes, please list your chapters:

To find your chapter, [click here](#)

For Principal Investigator Only: The below section should be completed by doctoral students submitting a dissertation proposal.

Degree Sought:

Expected Date of Completion:  
Please enter date in the following format yyyy-mm-dd

University/College/School:

Department:

Majors:

Minors:

Name of Research Advisor/Chairperson:

Biographical Sketch

Biographical Sketch for John Doe

Upon completing the biographical sketch, click the "Save" button at the bottom of this page to save this investigator's information. You MUST complete ALL of the required information on this page, before the biographical sketch for John Doe will be saved.

When editing any biographical sketch information, including reordering or deleting entries from either the education and/or professional expereinece section. You must click the "Save" button for your edits to be saved.

\* - required information.

Education

Please begin listing your education with Bacculaureate education and proceed to Post-doctoral level.

Click to <a href="#">Add another line</a>	Reorder	Institution and Location	Inclusive Dates of Attendance	Degree	Date Degree attained	Major
1	<div><div></div><div></div></div> <div></div>					
2	<div><div></div><div></div></div> <div></div>					
3	<div><div></div></div> <div></div>					

Professional Experience

Please begin listing your professional expereinece starting with the most recent.

Click to <a href="#">Add another line</a>	Reorder	Title of Position	Employer Name	Employer Address	Inclusive Dates
1	<div><div></div><div></div></div> <div></div>				
2	<div><div></div><div></div></div> <div></div>				
3	<div><div></div></div> <div></div>				

Honors, Publications and Papers Presented, Previous Research Experience and Grants

Honors\* (Include membership in Sigma Theta Tau International, Chapter Name, etc.)

Publications or papers presented at State, Regional or National/International meetings\* (You may include copies of your publications which support this application, at the end of the Appendices.)

List previous research experience, describing levels of participation in and purpose of grant(s)\* (i.e. Principal Investigator, Project Director, Research Analyst/Assistant, Data Collector, etc.)

Previous Grant(s) received as Principal Investigator\* (list amount and source of funding per study)