



Application for the George A. Bray Master's Thesis and George A. Bray Doctoral Dissertation Awards

Name of Applicant:

Address:

Phone:

Email:

Institution:

Department:

Name of Committee Chair:

Institution:

Department:

Address:

Phone:

Email:

Master's Thesis _____ Doctoral Dissertation _____ (check one):

Name of Institution where work was completed:

Date of Successful Defense:

ATTACH A SINGLE FILE TO INCLUDE:

- 1. A SIGNED, PDF SCAN OF THIS APPLICATION**
- 2. A ONE PAGE OVERALL SUMMARY OF THESIS OR DISSERTATION**
- 3. A PDF OF YOUR FINAL DEFENDED MASTER'S THESIS OR DOCTORAL DISSERTATION AND RETURN TO:**
grantsandawards@obesity.org

Signature of Applicant:

Signature of Committee Chair:

By signing above, I (We) attest to the fact that _____ (student name) has successfully defended their Master's Thesis /Doctoral Dissertation on the date stipulated above.

I (We) understand that in order to receive reimbursement of up to \$1,500 for travel related expenses to ObesityWeek, the student must show proof of registration for the current year's annual meeting.