REQUEST FOR FACULTY RESEARCH FUNDING
SUBMITTED TO UNIVERSITY ENRICHMENT COMMITTEE

Fall Proposals Due December 1, 2013
Announcement of Recipients is December 15, 2013

Spring Proposals Due March 1, 2014
Announcement of Recipients by March 22, 2014

NAME: ___________________________ PHONE: ______ CMB: _______________

DEPARTMENT: ____________________ PROJECT STARTING/ENDING DATES: ____________

PROJECT TITLE: __________________________

A. PROJECT PROPOSAL - DESCRIBE ON ATTACHED SHEETS: (1) 100 word abstract; (2) background information and specific objectives of the proposed project; (3) methods by which project objectives are to be attained with appropriate references; (4) an itemized budget, including brief explanations for expenses.

B. SUMMARY OF PROPOSED BUDGET (Please include an itemized budget on attached sheets.)

Total cost of project . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . $ _______

Other Support: Source ____________________________ - _______

Support Requested of University Enrichment Committee * . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . $ _______

C. IRB INFORMATION: Does your research involve the use of human participants? Yes____ No____

For research that involves the use of human participants, please be aware that IRB approval must be obtained before beginning research. Please consult IRB approval processes information on the university website, http://www.pugetsound.edu/academics/faculty--staff-resources/professional-development/irb/ for details.

- If your research is “exempt,” please include a statement of exempt approval status from your departmental IRB designate as explained on page 10 of the IRB document.
- If your research requires expedited or full board review, please include a copy of all completed and approved IRB materials with your application.
- If you are unable to provide such documentation at this time, please explain why in your application and sign below.

I, ___________________________(print name), agree to obtain IRB approval before beginning research involving human participants. ___________________________(signature).

D. FOREIGN TRAVEL: Does your research involve travel outside of the United States? Yes____ No____

If yes, please list the name of all countries where you plan to travel:

________________________________________

- Please sign a Waiver, Release, and Indemnification Agreement for Faculty Foreign Travel form and include a copy with your application materials, http://www.pugetsound.edu/academics/faculty--staff-resources/professional-development
• Are any of the above-named countries currently on either the Department of State’s travel warning list, http://www.travel.state.gov/travel/cis_pa_tw/tw_1764.html or on the Centers for Disease Control’s travel health warning list, http://wwwnc.cdc.gov/travel/default.aspx? If “yes”, please include a signed Special Waiver and Acknowledgement for Faculty Foreign Travel form, http://www.pugetsound.edu/academics/faculty--staff-resources/professional-development

SIGNATURES:
As the applicant for funding, I agree to provide the University Enrichment Committee with the reports as required and to provide Accounting and Budget Services with the required expense receipts and accounting documentation.

____________________________________________     __________________________
Applicant                                      Date

As the department chair/school director I agree to assess professionally the results of the research should I be requested to do so by the University Enrichment Committee.

____________________________________________     __________________________
Department Chair/School Director               Date

*The maximum award will not normally exceed $2000.00.

Send one (1) copy of the request to Associate Dean Sunil Kukreja, CMB 1020, Jones 212.

Rev.7/13