



CEHS Undergraduate Student Research Grant Application Form

STUDENT AND PROJECT DETAILS

Student Name:	Department:
Student Email Address:	
Title of Project:	
Is this project part of an undergraduate thesis or honors capstone? No Yes (<i>If yes, please provide a brief description of how this project will contribute to that requirement.</i>)	
Project Start Date:	
Amount Requested from College (\$):	
Match from home Department, including advisor (\$):	

REQUIRED APPLICATION ELEMENTS

List and order of elements to include in the application (please compile into a single PDF file entitled: “Applicant Name” – CEHS Undergraduate Research Grant Application):

1. This application form, complete with all signatures;
2. Overview of the proposed research project (one-page maximum);
3. Letter of support from the research mentor;
4. Itemized/detailed budget and justification;
5. Copy of IRB or IACUC approval to conduct research. (If not included with the application, candidates with meritorious projects will be notified of the award; however, funds will not be dispersed until the recipient provides documentation of IRB or IACUC approval to the Associate Dean for Research.)

STUDENT/APPLICANT ACKNOWLEDGMENT OF RESPONSIBILITIES

By providing my signature below, I affirm that *I will work with my advisor to complete the project and coordinate with my advisor and the departmental business manager the management of expenses (as budgeted) in accordance with award policies, including appropriate record keeping of expenditures.*

Student signature:	Date:
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ADVISOR ACKNOWLEDGEMENT OF RESPONSIBILITIES

By providing their signature below, the advisor for this project affirms that *the advisor is committed to supporting the completion of this project, including overseeing the financial management of the project in accordance with award policies.*

Advisor Name:	Advisor email:
Advisor Signature:	Date:

DEPARTMENT HEAD AND BUSINESS MANAGER ACKNOWLEDGEMENTS

By providing their signatures below, the department head and departmental business manager affirm that the department: *(a) agrees to provide a 50% match to arrive at the total funds requested as indicated above; and (b) the business officer will support the financial management of the award in coordination with the faculty advisor and student.*

Department Head Name:	Department Head Email:
Department Head Signature:	Date:

Business Officer Name:	Business Officer Email:
Business Officer Signature:	Date: