

---

CHECKLIST (to be included with application)

1. Signed Application ( )  
Submit application electronically
2. Proposal Narrative ( )
3. Budget ( )
4. Budget Narrative ( )
5. Curriculum Vitae of Project Director and Principal Project Participants ( )

---

Signature(s)

---

---

---

SCIENCE INSTITUTE APPLICATION FORM

---

1. Project Director: \_\_\_\_\_  
Campus Address: \_\_\_\_\_  
Campus Phone: \_\_\_\_\_  
Project Associate(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Field(s) of Applicant(s): \_\_\_\_\_  
\_\_\_\_\_

3. Type of Submission: \_\_\_\_\_  
\_\_\_\_\_ Faculty Research  
\_\_\_\_\_ Faculty/Student Research

4. Type of Application: \_\_\_\_\_ New  
\_\_\_\_\_ Renewal

5. Time Period for Expenditure of Funds: From: \_\_\_\_\_ To: \_\_\_\_\_

6. Total Project Funding:

Total Project Costs

\$\_ 0 612 792 re W\* n BT /TT0 1 Tf 12 0



---

BUDGET SUMMARY

---

Title of Project: \_\_\_\_\_

---

CATEGORY

AMOUNT REQUESTED  
FROM SCIENCES INSTITUTE

1. PERSONNEL: (Stipends) \$ \_\_\_\_\_

2. TRAVEL: \$ \_\_\_\_\_

3. SUPPLIES: \$ \_\_\_\_\_

4. EQUIPMENT \$ \_\_\_\_\_

5. RENTAL \$ \_\_\_\_\_

6.. OTHER: \$ \_\_\_\_\_

TOTAL PROJECT FUNDS REQUESTED: \$ \_\_\_\_\_

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

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

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

---

BUDGET NARRATIVE

---

1. PERSONNEL:

2. TRAVEL:

3. SUPPLIES:

4. EQUIPMENT PURCHASE:

5. RENTAL:

6. OTHER: