

Research Grant Development (RGD) Grant Application

NOTICE: *You cannot save data directly entered on this application. To successfully complete application and have a copy for your records, first save to your computer (such as your desktop). Next, open the newly saved form. Complete application and save again before printing.*

PROJECT INFORMATION			
PROPOSED PROJECT TITLE:			
PERIOD REQUESTED:		SPONSOR:	
<i>Semester:</i>	<i>Year:</i>	<i>Competition:</i>	<i>Due:</i>

INVESTIGATOR INFORMATION			
PRINCIPAL INVESTIGATOR:		DEPARTMENT:	
ACADEMIC APPOINT/TITLE:		PHONE EXT:	EMAIL:

ANTICIPATED COMPLIANCE REQUIREMENTS		
<input type="checkbox"/> HUMAN SUBJECTS	<input type="checkbox"/> VERTEBRATE ANIMALS	<input type="checkbox"/> USE OF BIOHAZARDS/rDNA

APPLICANT CERTIFICATION AND AUTHORIZATION	
<input type="checkbox"/> I certify that the statements herein are true, complete and accurate to the best of my knowledge. I agree to accept responsibility for scientific conduct of the project and to provide the required progress reports if a Research Pilot Studies grant is awarded as a result of this application.	
I accept responsibility for payment of any and all over-expenditures should they occur as a result of this project. Any publication, poster or presentation resulting from this RGD grant, other than the grant application, will cite the project as "Conducted under a grant from the Stephen F. Austin State University Research Enhancement Program."	
PI SIGNATURE:	DATE:

DEPARTMENT REVIEW & APPROVAL	
<input type="checkbox"/> Faculty status, reassigned time (fall/spring), or summer availability (equivalent of 6 weeks half-time) have been reviewed and approved.	
DEPARTMENT CHAIR SIGNATURE:	DATE:

1. BUDGET REQUEST

ADJUNCT SALARY OR \$ _____
SUMMER STIPEND @ \$5,000 \$ _____

** Maximum award limit is \$5,000.*

PROJECT SUMMARY

Provide a brief description of the proposed research study and justification for the request for reassigned time or salary support.