

Minigrant Application Publication Support (PUB)

Please refer to Minigrant Guidelines.

All applications must be typed. Use paperclips to attach documentation - do not staple.



PI INFORMATION		PROJECT TERM
Principal Investigator		Semester
Department		Year
E-mail	Phone ext:	

PUBLICATION DETAILS Fees requested for: Page Publication Indexing

Publication Title _____

Name of Journal, Book and/or Publisher _____

REQUEST AMOUNT

Amount of Funding Requested (max of \$750) _____

MATCHING

50% matching is required for PUB minigrants. Indicate source(s) providing match and specific dollar amount.

Source	Amount
Applicant	_____
Department	_____
College	_____
Other, please specify	_____

PUBLICATION DOCUMENTATION

Attach documentation of publication acceptance and page charges from peer-reviewed journal. PUB minigrants do not pay for review or submission fees.

CERTIFICATION

I certify that this project does not directly support the conduct of a master's thesis or doctoral dissertation.

Principal Investigator Signature _____	Date _____
Chair Signature _____	Date _____

After PI and Chair signature, campus mail application to ORSP Box 13024.

For ORSP use only

Pending Prior Year Reports: Yes No Approved: \$ _____ FOP: _____

Current Internal Grants: _____ Denied: _____

Final Report Received _____

URC Chair / ORSP Director Date