The Research Excellence Initiative in the College APPLICATION FORM Fiscal Year for Funding: 2020-2021

PART 1: ALL APPLICANTS

General Information

- 1. Principal Investigator (Last, First, MI): Click here to enter text.
- 2. Faculty Rank, Position, or Degree Sought: Click here to enter text.
- Phone: Click here to enter text.Email: Click here to enter text.
- **4.** Administrative Unit: (e.g., Center, Dept., Program, Major, or School): Click here to enter text.
- **5.** Name of Advisor, Chairperson, or Supervisor: Click here to enter text.
- **6.** Name(s) of Collaborators and Department and/or Institution (if any): Click here to enter text.
- 7. Project Title: Click here to enter text.
- 8. Fund Name: (Select from drop down): Choose an item.

NOTE: You may apply for more than one fund within a given year (including applying to multiple funds for the same project), but a separate application is needed for each fund and you must rank your preferences in the space below.

9. Ranking of Funds for Consideration (Select from drop-down): Choose an item.

Project or Travel Summary (1-page maximum)

Summarize the research activities to be conducted that are relevant to the request for support (e.g., research proposal, reason for travel, description of scholarly work to be reviewed, student mentoring activities, objectives of a proposed conference, research being conducted during teaching release, etc.).

Include expected impact of the proposed work, the anticipated outcomes as they relate to the goals of the fund, the plan for student engagement, and the ways this work contributes to the strategic goals of the College (see the College Strategic Plan at http://collegedean.ku.edu/strategicplan.)

NOTE: Please consult information in the relevant fund description to be sure that you include all required information, including any "special requirements" within funds.

10. Insert text below or attach document

Key Words: (Please choose words or phrases that describe your project; 10 maximum)		
11. Click here to enter text.		
Timeline: Timeline specifics (with dates) of measureable outcomes that include completion of scholarly products, funding applications, travel, and/or student involvement as applicable to the specific objectives of the fund.		
12. Click here to enter text.		
Budget Justification : Please add a brief (1-page maximum) Budget Narrative to accompany the attached Excel Budget Form (when required). See fund descriptions for requirements.		
13. Insert text below or attach document		
Please also attach the following:		
 □ Curriculum Vitae/s or resume/s as required in the fund □ Budget (fill out only relevant parts of the Excel Budget Form) □ Appendix A: Approvals for University Regulations for Research Projects 		
Signature of applicant Date		
Signature of chairperson (for faculty), advisor (for students), or supervisor (for staff) indicating approval of this application		

PART II: EXPANDED PROJECT DESCRIPTION

(CR1, CR2, DSR, TSU, FIG, COR, FWI, ESM, CLD only)

Expanded Project Description (4 page maximum including applicable figures, tables, etc.).

Describe in more detail the background, project goals and objectives, approaches, and significance/impacts of the research activities to be conducted and/or the research-mentor activities (for ESM). Please describe how student participation plays a role in these activities as relevant to the goals of the fund.

NOTE: Please consult all information in the relevant fund to be sure that you include all required information, and it is up to the applicant to relate this description to the goals of their specific fund.

14. Insert text below or attach a separate document

CURRENT, PENDING and FUTURE Research Support (as relevant)

Please list all current research or projects submitted for support (internal & external). Include name of agency, title, amount, and co-investigators and the funding period.

15. Insert text below or attach a separate document

If applicable: What are plans for future support of this project or its substantial equivalent? To what extent does this request duplicate or supplement your presently funded research or the research program of a collaborator? Be specific about your plans for application, agencies and time schedule.

NOTE: If you believe that there are not appropriate external funding sources for this work, please indicate that here and provide a short rationale for why this is the case.

16. Click here to enter text.

Appendix A

Please attach the University Regulations for Research Projects Human Subjects Form. If the proposed study involves the use human subjects and/or experimental animals, the appropriate form MUST be filed for review with the Institutional Review Board (IRB) at the time of application. Applications without the accompanying required IRB protocol submission will not be evaluated.

Human Subjects/Recombinant DNA Compliance Form UNIVERSITY REGULATIONS FOR RESEARCH PROJECTS

Enclose approvals if applicable.

1.	 Human Subjects a. Does this project involve human subjects (includes interviews, questionnaires, surveys and observations)? Yes□ No□ 		
	b.	If Yes, have you applied for approval from the Human Research Protection Program (HRPP, 4-7429)? Yes□ No□	
	C.	Have you received approval? (If Yes, attach the approval) Yes□ No□	
2.	<u>An</u>	imal Research	
	a. b.	Does the project involve animals? Yes□ No□ If yes, have you applied for approval from the Animal Care Committee (4-5587)? Yes□ No□	
	C.	Have you received approval? (If Yes, attach the approval) Yes□ No□	
3.	Ra	diation Safety	
	a.	Does the project involve radiation sources (includes x-rays, radioisotopes etc)? Yes□ No□	
	b.	If Yes, have you applied for approval from the Radiation Safety Committee (contact the Environment, Health & Safety Office, 4-4089)? Yes □ No □	
	C.	Have you received approval? (If Yes, attach the approval) Yes□ No□	
4.	Kansas Ecological Reserves		
		Does the project involve the Kansas Ecological Reserves? Yes □ No □ If Yes, have you applied for approval from the Director of the Kansas Biological Reserves (Ed Martinko, 4-7770)? Yes □ No □	
	C.	Have you received approval? (If Yes, attach the approval) Yes □ No □	
5.	_	<u>ohazards</u> Does the project involve Recombinant DNA or other biohazardous materials? Yes □ No □	
		If Yes, have you applied for approval from the Institutional Biosafety Committee (contact the Environment, Health & Safety Office, 4-4089)? Yes □ No □	
	C.	Have you received approval? (If Yes, attach the approval) Yes □ No □	

Final approval of any allocation will be contingent upon compliance with the above University regulations.