



REQUEST FOR FUNDING

**Office of the Vice Chancellor for Research and Economic Development
Campus Box 4000, 312 South Building**

Endorsement by Department Head/Chair and Dean required before submission to the Office of the Vice Chancellor for Research and Economic Development. Forms should be received no later than one week prior to proposal deadline.

Name(s) of Principal Investigator(s)/Professor(s): _____

Campus Address: _____

Phone #: _____ Email address: _____

Department: _____ College/School: _____

Title of Proposal: _____

Summary: Please provide brief summary of proposal and proposal budget on separate page.

Funding Agency: _____

Does funding agency require match? _____ Level of required match: _____

Submission Date: _____ Expected Start Date: _____ End Date: _____

Requested amount of institutional support (Please denote by year):

| | YR | YR | YR | YR | YR |
|------------------------------|----|----|----|----|----|
| Department | | | | | |
| College/ School | | | | | |
| Vice Chancellor for Research | | | | | |
| Other | | | | | |

Proposed expenditures of institutional support by category:

Equipment: _____ Program support: _____

Salaries: _____ Other: _____

Department Head/Chair: _____ School/College: _____

Vice Chancellor for Research and Economic Development: _____