Family name *
Oratone

Given name *
Dixisset

Department *
Oratone

UCID *

Email *
test@test.com

Rank *
○ Professor
○ Associate Professor
○ Assistant Professor
○ Other...

Type of appointment *
○ Tenured
○ Tenure-track
○ Full-time
○ Part-time

Term of appointment *
Oratone

Start date of first academic appointment *
2018-01-31

When would you want your award to begin? *
○ January 1
○ July 1
Title of Project *
Oratone

Proposed start date *
Please enter date as YYYY-MM-DD
2020-09-07

Budget summary
Undergraduate student stipend
Loremipsum

Graduate student stipend
Dixisset

Research assistant salary
Oratone

Other personnel
Oratone

Travel
Dixisset

Equipment
Loremipsum

Materials and supplies
Oratone

Other (provide details in budget justification)
Dixisset

Total *
Dixisset
Certification requirements
Indicate if this proposal involves any combination of the following and, if yes, either provide the relevant university certification identification number, or attach the certificate.

Human subjects
Does your proposal involve human subjects? *

☐ Yes
☒ No

Animal subjects
Does your proposal involve animal subjects? *

☐ Yes
☒ No

Biosafety
Does your proposal involve biosafety? *

☐ Yes
☒ No
Part 4: Project description

Provide a description of the background, objectives, methodology or research creation process, and significance of the project.

Max. 1000 words

Part 5: Expected outcomes

Provide a list of explicit, anticipated tangible outcomes of the project and an associated timeline for the 18-month period of the award. Projects without explicit outcomes defined will not be considered.

Max. 500 words

Part 6: Budget justification

Provide a description of the budget items summarized above, indicating their relevance to the proposed project. Please clearly indicate the need for funding.

Max. 500 words

Part 7: Curriculum vitae

part_7_curriculum_vitae.odp

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One file only.
100 MB limit.
Allowed types: txt rtf pdf doc docx odt odp ods.

I'm not a robot

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