

Fall 2016 CEES Mini Grant Application

Our goal is to get competitive proposals funded so that you can do interesting and innovative scholarship and creative activities. Not to make busy-work. Please fill out the form below, but do not agonize over it. Brief, clear proposals are welcome. If you have any questions, please call Kim Couch at 758-CEES.

Personnel Information		
Name:	Department:	For Office Use Only Date received: _____ By: _____
Rank: () Professor () Associate Professor () Assistant Professor () Instructor or Lecturer () Other		
Status: () Tenured () Tenure-track () Visiting/Temporary () Research Staff/Adjunct () N/A		
Project Information		
Title:		
Duration: (include begin and end dates)		
Amount Requested:		
External Support Information		
If you have other commitments or overlapping obligations during the proposed project period, please indicate how your time will be allocated.		
Priority		
() junior faculty whom an award will assist in becoming competitive for external support		
() more experienced faculty entering new areas or reengaging in research		
Previous Internal Award History (please indicate awards received for similar projects in the past 4 years)		
Publication & Research: Archie Fund: Year Amount \$ Science Research Fund: Year Amount \$ Social Science Research: Year Amount \$ Cross-Campus: Year Amount \$ Interdisciplinary Innovation & Entrepreneurship: Year Amount \$ Other: Year Amount \$	<i>Please use this space to record additional internal awards as needed.</i>	
For Office use only		
Number of previous internal awards/declines _____		
Final report from previous internal awards received _____		

Application Instructions

Compliance: Does this proposal involve or require:

___ human subjects, ___ animals, ___ biohazards, ___ hazardous chemicals, ___ radioactive materials, ___ imaging services, ___ select agents*/toxins

IF yes, you must have appropriate committee(s) approval before the project can begin.

For the list of select agents, click [here](#).

Complete applications include all the items listed below in the following order:

- _____ Completed, signed application page
- _____ Format I: Abstract, Objectives, Background & Significance, Methods
- _____ Format II: Question or Problem, Research Methods, Timetable
- _____ References cited
- _____ Detailed Budget
- _____ Budget Justification
- _____ CV, including publications
- _____ Outcome of previous CEES awards
- _____ List of WFU Collaborators

Incomplete applications will not be reviewed.

Please send a completed copy of your Application form and proposal in one file as an attachment to Kim Couch (couchkm@wfu.edu). Applications will be reviewed beginning on Monday, October 24, 2016.

Please allow several weeks for the review process.

<i>Signature of Applicant:</i>	Date:
<i>Signature of Department Chair or Equivalent:</i>	Date

<i>Signature of Co-Applicant:</i>	Date:
<i>Signature of Department Chair or Equivalent:</i>	Date