

Graduate Student Research Grant Proposal Application

Name _____ WKU ID # _____
Last First M/M

Email _____ Expected Date of Completion _____

Department _____ Advisor _____

Does this project require Human Subjects approval? Yes ___ No ___ If yes, please provide Human Subjects Reference # _____

By providing my initials, I certify my understanding of the following: *Any expenses incurred prior to receiving a grant are ineligible for reimbursement (and are my own responsibility).* _____

Request for Grant of Funds in the Amount of \$ _____ (Maximum \$1,500).

Please submit the following **REQUIRED** documents with your application (see website for additional instructions):

1. Formal Budget Form (Please see Form for more details other than those listed below)
 - a. Materials/Supplies (Item, quantity, cost per unit, total cost)
 - b. Equipment
 - c. Travel (only travel such as field work that is vital to conduct the project; conference travel for professional development/presentation is not supported). Please refer to current WKU travel policy and restrictions due to COVID-19.
 - d. Participant Support and/or Human Subjects
 - e. Cost sharing (if there is cost-share, the applicant needs to note exact amounts/sources of cost share.)
2. Research Proposal
 - a. Title of Proposed Project
 - b. Purpose of the Study
 - c. Design of the Study
 - d. Intended Use of Results and Possible Application of Results
3. Student Bio (CV/Resume)
4. Statement from the student and the advisor certifying that no documents included in the research grant proposal have been plagiarized.
5. Letter of endorsement of the research project or creative activity from the advisor
6. Please be sure to submit Human Subjects, IACUC or IBC approval letter (if applicable)
7. **ALL APPLICATION MATERIALS ARE TO BE SUBMITTED BY THE DEADLINE TO gsresearchgrant@wku.edu. Any application that does not contain all necessary materials will be returned to the student. Only completed applications submitted by the deadline will be considered.**

List previous Graduate Student Research Grants (date and amount)

Student Signature _____ Date _____

This student research proposal has been approved and is consistent with research expectations in the discipline.

Advisor Signature _____ Date _____

Department Head Signature _____ Date _____

College Dean Signature _____ Date _____

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Additional Students Contributing to this Project

Did any other students contribute to this project? Yes___ No___ If yes, please indicate below:

Name: _____

Department: _____ Advisor: _____

Name: _____

Department: _____ Advisor: _____

Name: _____

Department: _____ Advisor: _____

Name: _____

Department: _____ Advisor: _____

Name: _____

Department: _____ Advisor: _____