**Graduate School and Research**

**Research & Scholar Awards**

**Faculty Research and Creative Activities Award**

Application

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| **Faculty Research and Creative Activities Award**  |
| **Date Submitted**       | **Please submit application as an electronic copy to** **rstiles@email.wcu.edu** **or send a hard copy to Graduate School and Research, 110 Cordelia Camp.** |
| **Applicant’s Name**      |
| **Office Address**      | **Telephone Number**      | **E-Mail Address**      |
| **Department**      | **College**      |
| **I understand and accept the terms and conditions of the award as****set forth in the Graduate School and Research guidelines.** |
| **Signature of Applicant** | **Date** |
| **Signature of Department Chair (if different)**  | **Date** |
| **Signature of Dean of Applicant’s College** | **Date** |
|  |
| **Project Title** (Do not exceed 100 characters)      |

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| **Reviews**: Does the project involve research with any subject or substance which requires review by a designated individual, office, or committee? [ ]  No [ ] Yes If yes, complete the appropriate line(s) below. |
|  |  | **Approved** | **Pending** | **Exempt** |
| [ ]  Human Subjects | Indicate the date reviewed or the date to be reviewed and check the appropriate column to the right indicating the results of the review:       | [ ]  | [ ]  | [ ]  |
| [ ]  Animal Subjects | Indicate the date reviewed or the date to be reviewed and check the appropriate column to the right indicating the results of the review:       | [ ]  | [ ]  | [ ]  |
| [ ]  Radioactive Materials | Indicate the date reviewed or the date to be reviewed and check the appropriate column to the right indicating the results of the review:       | [ ]  | [ ]  | [ ]  |
| [ ]  Potential Biological  Hazards | Indicate the date reviewed or the date to be reviewed and check the appropriate column to the right indicating the results of the review:       | [ ]  | [ ]  | [ ]  |
| [ ]  Hazardous  Chemicals | Indicate the date reviewed or the date to be reviewed and check the appropriate column to the right indicating the results of the review:       | [ ]  | [ ]  | [ ]  |

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| **Budget** |
|  | **Amount Requested** | **Justification (up to 150 characters in each box)** |
| **Summer Salary for Applicant** (include FICA at 7.65% or current FICA rate and retirement at applicable rate) | 0.00 |       |
| **Salary for Research Assistant** (Note: An enrolled Graduate Research Assistant receives $3,000 per semester stipend and FICA taxes are not deducted.) | 0.00 | **Describe functions**:       |
| **Salary/Wages for Secretarial or Clerical Help** (include FICA at 7.65% and Retirement at applicable rate) | 0.00 | **Describe functions**:       |
| **Travel**: (Must use applicable University rates and adhere to University travel policies) | 0.00 | **Describe purpose:**       |
| **Supplies** (Must follow University purchasing policies) | 0.00 | **Describe use**:      |
| **Equipment**  (Must be appropriate for this project—provide an additional page of justification if you feel that is necessary; must follow University purchasing policies) | 0.00 | **Describe use**:       |
| **Other** | 0.00 |        |
| **Total** | **0.00** | **May not exceed allowable award amount of $5000** |