


Deliver or mail one paper copy of the completed application to Sherry May, Office of Sponsored Programs, Suite #25, Kepner Hall, or email a scanned copy to sherry.may@unco.edu, or fax to the attention of Sherry May at 970-351-1934. All submissions must include signatures (not typed or printed names), and must be received by 5:00 p.m. on the published deadline date.

The Research, Dissemination and Faculty Development program supports faculty scholarship and professional activity in the faculty's efforts to develop as teachers, researchers, scholars and artists. Please review the guidelines available on the [OSP website](#).

Applicant Name: _____ Email Address: _____
 Dept/Div/School: _____ ORG:  _____ Campus Phone: _____
 Campus Address: _____ Bear Number: _____

This is an individual application.

This is a collaborative application with other UNC faculty. (List names of collaborators below; see RDFS guideline #2.)

UNC Collaborators: _____

Title of Project: _____

Proposed Start Date: _____ Anticipated Completion Date: _____

Brief Summary of Proposed Project (Also attach a complete description following the RDFS Application Requirements, item #2):

PROJECT SUPPORT

Provost Fund Request: \$ _____	Should match the total of the first column on the project budget form
Other Funding Source: \$ _____	Source of Funding: _____
Other Funding Source: \$ _____	Source of Funding: _____
Other Funding Source: \$ _____	Source of Funding: _____
Total Anticipated Cost: \$ _____	Should match the total of the third column on the project budget form

COMPLIANCE APPROVALS: *RDFS funds will not be released until necessary approvals have been secured and documentation provided to the FRPB.*

Does the project involve human subjects?	Yes	No	Does the project involve animal subjects?	Yes	No
If yes, has it been approved by the IRB?	Yes	No	If yes, has it been approved by the IACUC?	Yes	No
If yes, what was the approval date? _____			If yes, provide the approval #: _____		

SIGNATURES (Proposals lacking required signatures will not be considered for funding.)

Applicant: _____ Date: _____
 Director/Chair: _____ Date: _____
 Dean: _____ Date: _____

Provost Fund Research, Dissemination & Faculty Development Program

BUDGET FORM: Please ensure that the sum of column 1 (Provost Funds requested) and column 2 (Other Sources) is equal to the amount in column 3 for each row; also ensure that each column sums correctly.

All costs to be reimbursed to the applicant must be in compliance with UNC policies and procedures.

Budget Item	Requested from Provost Fund	Funds from Other Sources	Total Anticipated Project Cost
I. PERSONNEL Costs			
a. Salaries & Wages			
b. Fringe Benefits			
Personnel Subtotal			
II. CONTRACTUAL Costs			
a. Consultants			
b. Contracts			
Contractual Subtotal			
III. TRAVEL & CONFERENCE Costs			
a. Transportation			
b. Conference Registration			
c. Lodging			
d. Per diem or meals			
Travel Subtotal			
IV. EQUIPMENT Costs			
Equipment Subtotal			
V. OTHER Costs			
a. Materials & Supplies			
b. Publication/Dissemination			
c. Printing/Copying			
d. Participant Support			
e. Communication			
f. Miscellaneous Other Costs			
Other Costs Subtotal			
VI. TOTAL PROJECT BUDGET			

BUDGET JUSTIFICATION: Attach a budget narrative explaining in detail how the cost of each line item was determined and a narrative explanation for why the costs are necessary to the project and how the costs were determined

Examples:

Salaries & Wages – PI Smith @ .05 effort X 2 months plus graduate student hourly @ \$12/hour X 4 hrs/wk X 16 wks, plus narrative

Transportation – Roundtrip airfare on SW Airlines from Denver to Washington D.C. @ \$248 plus rental car @ \$95/day X 3 days, plus narrative

OTHER ATTACHMENTS (See RFD Proposal Guidelines):

- Description of Project, Workshop or Training Activity to be funded
- Current CV no longer than 3 pages