

Project title

Project start date

Project end date

Amount requested

Applications selected for funding will be funded for no more than one fiscal year.
Multi-year projects/programs will need to apply annually.

Any claims that a State match is required before an outside agency (e.g., NIH, NSF) will make an award must be substantiated by quoting the specific policy language of that agency in the proposal.

Principal Investigator

Name

Institution

Title

Email

Contract/Grant Administrator

Name

Email

Is this proposal for one of the programs below? YES NO - This proposal will be considered for the companion program.

If yes, which program:

Have you been awarded funding for this project? YES NO

If yes, please attach the award notification.

Have you applied for funding for this project? YES NO

If yes, please provide the following information.

Agency and program to which you applied

Total amount requested

If multi-year project, amount requested per project year

Anticipated date of notification

Do you intend to apply for additional funding for this project? YES NO

If yes, please provide the following information.

Agency and program to which you will apply

Total amount requested

If multi-year project, amount requested per project year

Anticipated date of application

Anticipated date of notification