

**Office Use Only:**
Funded: [ ] Yes [ ] No

Grant Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Richards Undergraduate Research Support Grant**

***Please hand deliver your completed/signed application to The Council on Student Scholarship, McAllister 219 by the deadline: September 12, November 14, January 23, and April 10.***

**Name:** Click here to enter text. **Signature: ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Campus Box:** Click here to enter text. **Email:** Click here to enter text.

**Mentor:** Click here to enter text. **Mentor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Department:** Click here to enter text.

**Amount Requested (Max $1,500):** Click here to enter text.

**Project Title:** Click here to enter text.

**Project Dates:** Click here to enter text.

**Project Summary** (limit 200 words):

Click here to enter text.

**If the project requires a research clearance (IRB or IACUC), has it been obtained?**

[ ] No clearance necessary [ ] Yes, as part of a larger faculty sponsor project

[ ] Yes, as my project [ ] No, appropriate forms have been submitted

 \*If no, when do you anticipate receiving clearance? Click here to enter text.

Have you applied for other funding? If yes, please check which one you applied for below.

[ ] Richards Scholar Award [ ] Kirbo Scholar Award

[ ] Synovus Sophomore Scholar Award [ ] Student Research and Development Funds

[ ] Howell (through the Career Center) [ ] Clark Grant (through the Career Center)

**Please attach a:**

* Detailed project narrative which includes the purpose of the project, a timeline for completing the project, a specific research process, your expected outcomes, and how this furthers your scholarly development; and
* Mentor’s letter of recommendation that discusses the value of this project for this emerging scholar.

Budget:

|  |  |
| --- | --- |
| Item | Cost |
| Materials and Supplies (itemize) |  |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Subtotal Materials and Supplies: | Click here to enter text. |
|  |  |
| Travel |  |
| Transportation Click here to enter text. | Click here to enter text. |
| Lodging: Click here to enter text.nights at Click here to enter text.per night | Click here to enter text. |
| Meals: Click here to enter text.days at Click here to enter text. Per day | Click here to enter text. |
| Subtotal travel: | Click here to enter text. |
|  |  |
| Equipment (Itemize) |  |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Subtotal equipment: | Click here to enter text. |
|  |  |
| Registration Fee (please describe) |  |
| Click here to enter text. | Click here to enter text. |
| Subtotal registration fees: | Click here to enter text. |
|  |  |
| Other (itemize) |  |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Subtotal other: | Click here to enter text. |
| **TOTAL PROJECT COST:** | Click here to enter text. |

Attach copies of documentation used to construct your budget.