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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SPONSOR INFORMATION:****Name:** Click or tap here to enter text.**Department** Click or tap here to enter text. **Signature:**Click or tap here to enter text. | | | Undergraduate Research Grant Proposal Funding Period: Check one box  Fall 2024 (due 09/03/2024)  Spring 2025 (due 01/21/2025)  Summer 2025 (due 03/17/2025)  Fall 2025 –Supplies Only (due 05/05/2025) | | | **Department Chair Signature:**Click or tap here to enter text. | | |
| **Project Title:** Click or tap here to enter text. | | |
| **UMW Institutional Research Board:**  Not Required: Required Date of Application:Click or tap here to enter text. | | |
| Student(s) Information (Add list if needed for a larger group) | | | | | | | | |
| **Name:** Click or tap here to enter text.  **GPA** Click or tap here to enter text.  **Email:**Click or tap here to enter text. | | **Name:**Click or tap here to enter text.  **GPA** Click or tap here to enter text.  **Email:**Click or tap here to enter text. | | | **Name:**Click or tap here to enter text.  **GPA** Click or tap here to enter text.  **Email:**Click or tap here to enter text. | | **Name:**Click or tap here to enter text.  **GPA** Click or tap here to enter text.  **Email:**Click or tap here to enter text. | |
| **Description of Proposed Activity:**  Click or tap here to enter text. | | | | | | | | |
| **List the frequency and nature of the interaction between the student and the sponsoring faculty member during the project:**  Click or tap here to enter text. | | | | | | | | |
| **Please email this completed form** with all signatures via email to Dr. Elizabeth Lewis, Assistant Dean of the College of Arts and Sciences ([elewis@umw.edu](mailto:elewis@umw.edu)) by the deadlines indicated above with the **subject line** “Undergraduate Research Grant Application,” copying Meredith O’Connell ([moconne4@umw.edu](mailto:moconne4@umw.edu)). | | | | | | | | |
| **Travel Information:**  **Travel to Attend Conference**  **Conference Information:** Attachsupporting documentation of participation (e.g., letter of invitation or acceptance)  Conference Title: Click or tap here to enter text.  Location:Click or tap here to enter text.  Dates: Click or tap here to enter text. | | | | | | | | |
| Travel for Research  Location: Click or tap here to enter text.  Dates: Click or tap here to enter text. | | | | | | | | |
| Budget: | | | | | | | | |
| Travel Expenses: For travel, use Commonwealth of VA guidelines for lodging and *per diem.* Contact AP for abroad lodging and per diem rates. All travel is to be entered in Chrome River.  NOTE: For International travel, you are required to enroll in medical insurance offered through UMW’s Center for International Education (CIE). Contact CIE (ext. 1434) for more information. | | | | | | | | |
| **Travel Budget Expenses:** | # of students | | | # of days | Cost per student/per day | | | Total |
| **Conference Fees:** | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| **Hotel (# of nights):** | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| **Per diem:** | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| **Per diem (travel days):** | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| **Travel Expenses:** | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| Transport to/from airport | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| Mileage: | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| Parking fees: | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| Other expenses: | Click or tap here to enter text. | | | Click or tap here to enter text. | Click or tap here to enter text. | | | Click or tap here to enter text. |
| Grand Total |  | | | | | | | Click or tap here to enter text. |
| Supply Expenses:  List the supplies needed, cost, and total for fund request.  NOTE: Supplies should be purchased with department credit card. Must follow Commonwealth of VA rules and regulations.   |  |  |  |  | | --- | --- | --- | --- | | Description: | # of item | Cost per item | Total Cost | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | **TOTAL REQUEST:** | | | $Click or tap here to enter text. | | | | | | | | | |
| **Faculty Sponsor Rationale Statement:**  Click or tap here to enter text. | | | | | | | | |