

2024-2025 Research Signature Page

Research Grant Name:

| |
|--|
| |
|--|

Proposal Title:

| |
|--|
| |
|--|

Total Amount Requested:

| |
|--|
| |
|--|

Faculty PI:

| | | |
|-----------------|--|------------|
| Name: | | Signature: |
| Affiliation: | | |
| Email: | | |
| Phone: | | |
| Campus Address: | | |

Department Chair or Program Director:

| | | |
|-----------------|--|------------|
| Name: | | Signature: |
| Affiliation: | | |
| Email: | | |
| Phone: | | |
| Campus Address: | | |

Other Participants:

| | | |
|-----------------|--|------------|
| Name: | | Signature: |
| Affiliation: | | |
| Email: | | |
| Phone: | | |
| Campus Address: | | |

| | | |
|-----------------|--|------------|
| Name: | | Signature: |
| Affiliation: | | |
| Email: | | |
| Phone: | | |
| Campus Address: | | |

FOR OFFICIAL USE ONLY:

Associate Dean:

| | | |
|-----------------|--|------------|
| Name: | | Signature: |
| Amount Awarded: | | |
| Notes: | | |