**Undergraduate Research Grant-in-Aid Application**

This application must be typed and submitted in hard-copy to the Undergraduate Research Office (Powell Building, room 108). *Only one GIA is awarded per student per academic year.* Funds do not roll over to the next fiscal year (fiscal year runs June 1 – May 31).

**Part 1 General Information**

|  |
| --- |
| Date Submitted:  |
| **PRIMARY STUDENT RESEARCHER INFO** |
| Name (first and last): | Click here to enter text. |
| Phone: | Click here to enter text. |
| \*Student ID (datatel): | Click here to enter text. |
| Campus Box: | Click here to enter text. |
| Year in School: | Choose an item. |
| Major: | Click here to enter text. |
| Email (include @elon.edu): | Click here to enter text. |
| Expected date of degree completion: | Choose an item. |
| Currently enrolled in 499? | Choose an item. |
| Currently enrolled in 498? | Choose an item. |
| Fellow status | Choose an item. |
| Is this project a part of a class? If yes, describe | Click here to enter text. |
| **FACULTY MENTOR INFO** |
| Primary Faculty Research Mentor Name (first and last): | Click here to enter text. |
| Primary Mentor’s Department: | Click here to enter text. |
| Primary Mentor Email: | Click here to enter text. |
| Secondary Mentor Name: | Click here to enter text. |
| Secondary Mentor Department: | Click here to enter text. |
| Secondary Mentor Email: | Click here to enter text. |
| **RESEARCH INFO** |
| Expected Research **Start** Date: | Click here to enter a date. |
| Expected Research **End** Date: | Click here to enter a date. |
| Title of Research Project |  |
| **IRB** # (if applicable) or date of intended application: | Click here to enter text. |
| **IACUC** # (if applicable) or date of intended application: | Click here to enter text. |

\* applications will not be accepted without a datatel

Please use the **last page** of this document to provide information on **all other students** involved in this project.

* IMPORTANT: All student projects involving the use of human participants that meet the definition of research given by Elon’s Institutional Review Board (**IRB**) MUST be reviewed and approved by the IRB (chair Dr. Stephen Bailey). Most, if not all, 499 projects involving human participants will require IRB review as those projects are intended to generate new knowledge for dissemination to the academic community. Grants may be awarded prior to IRB approval but no reimbursements will be made until the grant recipient provides proof of IRB approval (provide #) to the Undergraduate Research Office. Similarly, if your project involves the use of animals then you must contact Elon’s **IACUC** (Dr. Mike Kingston) to see if your project requires approval. Faculty mentors are responsible for ensuring compliance with IRB and IACUC review. If you have questions regarding whether the project requires IRB approval then contact the IRB/IACUC chairs.

**Part 2 Project Description**

* Please include a **300-400** word non-technical description of your project. The description must include information concerning the following aspects of your research: (1) purpose/goal of the project, including a rationale for its importance within your discipline; and (2) research methods/procedures to be used.

Enter description here

**Part 3 Budget**

Please provide an itemized proposed budget by describing your research needs and the amount of money you are requesting for each need.

|  |  |
| --- | --- |
| **ITEMS** | **Amount requested** |
| 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. |
| 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. |
|  | **TOTAL** | Click here to enter text. |

Briefly describe **why** you needs the funds described above. For costs which are not obvious (e.g., chemicals, piece of equipment), please explain how you arrived at the estimate.

Enter budget description here

**Note** that if this grant is awarded:

* Requests for reimbursement must be submitted no later than the date indicated in your award letter. The UR office will not send reminders about this deadline.
	+ The reimbursement form is available on our website and in the Powell 108 suite
* The fiscal year runs June 1-May 31 and all funds must be used within the fiscal year in which the award was given. Thus grants-in-aid do not carry over into the next academic/fiscal year (which starts June 1). Any funds that are not spent will not be accessible after the academic/fiscal year closes.
* All items become the property of Elon University (e.g., equipment, unused gift cards)
* **We do not pay students for their labor (e.g., transcription, inter-rater reliability) but we do reimburse for gift cards for participants and professional transcription like rev.com.**
* Barring extenuating circumstances, students who receive a Grant-in-Aid from the UR office are expected to present their projects at [**SURF**](http://www.elon.edu/e-web/academics/undergraduate_research/surf.xhtml) in the academic calendar year (or the following – discuss with your mentor).

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Student’ Signature | Click here to enter text. | Date | Click here to enter a date. |
| Primary Mentor’s Signature | Click here to enter text. | Date | Click here to enter a date. |
| Secondary Mentor’s Signature | Click here to enter text. | Date | Click here to enter a date. |

***Completed applications should be submitted to the Undergraduate Research Office, Powell Building Room 108***

*Please provide complete information on each additional student:*

|  |
| --- |
| **OTHER STUDENT RESEARCHER INFO** |
| Name (first and last): | Click here to enter text. |
| Phone: | Click here to enter text. |
| \*Student ID (datatel): | Click here to enter text. |
| Campus Box: | Click here to enter text. |
| Year in School: | Choose an item. |
| Major: | Click here to enter text. |
| Email (include @elon.edu): | Click here to enter text. |
| Expected date of degree completion: | Choose an item. |
| Currently enrolled in 499? | Choose an item. |
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\* *student datatels required*