**TWU 2024-2025 RESEARCH ENHANCEMENT PROGRAM**

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| **Principal / Contact Investigator** | | | | | | |
| Name | |  | | Department | |  |
| Academic Title (Rank) | |  | | Email Address | |  |
| Faculty Status | | Choose an item. | | | | |
| **Co-Investigator(s)** | | | | | | |
| Name | | | Rank | | Department | |
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| **Collaborators / Consultants**  A collaborator is a team member who adds expertise to the project without serving a large enough role to be considered an investigator. A collaborator may not receive direct funds. A consultant could receive funds to provide a specific service. | | | | | | |
| Name | | | Rank | | Department/Organization | |
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| **Project Title** | | | | | | |
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| **New or Resubmission** | | | | | | |
| Is this a new application or a revision to a previously submitted REP application? Choose an item. | | | | | | |
| **Compliance** (mark all that apply) | | | | | | |
| human subjects  use of animals  recombinant DNA or biohazardous agents  radioactive materials or radiation devices | | | | | | |
| **PI Model** | | | | | | |
| Faculty Status |  | | | | | |
| **Signatures (to be obtained by ORSP)**  Investigator(s): After receipt, the application will be routed by ORSP via Adobe Sign to all investigators who must sign to certify that he/she agrees to accept responsibility for the scientific conduct and/or carrying out of the project and abide by conditions of the grant as outlined in the guidelines. The application will also be routed for approval to the unit administrators and deans of all investigators. | | | | | | |

**ABSTRACT**

**In 150 words or less,** describe the project's broad, long-term objectives and specific aims. Describe concisely the research design and methods for achieving these goals. This description is meant to serve as a succinct and accurate description of the proposed work when separated from the application.

**ITEMIZED BUDGET AND BUDGET JUSTIFICATION**

Grants will be limited to $15,000. Investigators may elect to submit for either a $15,000 one-year grant or a two-year grant in which the total $15,000 is taken over a two-year period. If the two-year model is selected, the budget must reflect the amount for each year separately. Any budgeted funds not spent during the first year CANNOT be carried forward into the second year; therefore, the budget must be planned carefully and the research completed according to the timeline. Please contact ORSP for assistance for assistance with budget development.

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| **Budget** | **Year 1** | **Year 2** |
| 1. Faculty Salary Support (for PI only) | $0 | $0 |
| 2. Graduate Research Assistant | $0 | $0 |
| 3. Undergraduate Student Assistant | $0 | $0 |
| 4. Fringe Benefits | $0 | $0 |
| 5. Maintenance and Operations (supplies, postage, small equipment, animal per diem, etc.) | $0 | $0 |
| 6. Travel for Data Collection and Collaboration (conference travel not allowed) | $0 | $0 |
| 7. Capital (as defined by State of Texas purchasing guidelines) | $0 | $0 |
| 8. Other (explain in detail): | $0 | $0 |
| Total Amount Requested Each Year | $0 | $0 |
| **TOTAL AMOUNT REQUESTED (not to exceed $15,000)** |  | **$0** |

**Budget Justification**

**SUPPORT**

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| **Current and Pending Support**  For each investigator, list all current and pending sources of funding for this project. List the funding agency, amount, date of application, and application status. |
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| **Past TWU Support**  For each investigator, list any past Research Enhancement Program grants received in the last five years in the space provided on the form. |
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| **Publications, Proposals, and Awards Resulting From Past Support**  For each investigator, list all outcomes for the past five years that are a result of past Research Enhancement Program grants. |
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**REVISION SUMMARY**

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| If this application is a resubmission, please summarize the revisions made to your current application based on the feedback provided by the Research Support Committee. If this application is a new submission, please leave this field blank. |
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