Virginia Commonwealth University

APPLICATION FOR PRESIDENTIAL RESEARCH INCENTIVE PROGRAM AWARD

##### Cover Page

Name:       Academic Rank:

School:       Department:

P.O. Box:       E-mail:

Check one: Full-Time, Tenured

Full-Time faculty, Tenure Track

 Full-Time faculty, Non-tenure track (Part-Time, Adjunct are not eligible for PRIP)

      Number of years at VCU (if 3 or less, you must also have a mentor letter or a mentoring plan exception description)

Is this a revised application? Yes No

Project Title:

Amount Requested: PRIP contribution $

Dept./School contribution $

Signature of Applicant:                           Date:

*Applicant’s Signature*

###### ENDORSEMENT OF DEPARTMENT CHAIRMAN/UNIT HEAD

As Chairman of the Department (or relevant unit) of      , I endorse this

application and the information provided above. This project will be conducted in       (room and building) which will be available for this purpose

The Dept./School is providing $      as a matching contribution in cash for this project.

I have reviewed and discussed the mentoring plan, or approved an exception, with the applicant and his/her mentor:

Dept. Chairperson’s Signature:                           Date:

*Dept. Chairperson’s Signature*

Dean’s Signature:                           Date:

*Dean’s Signature*

Previous/Current Funding and Collaborators

Provide a brief description of any project(s) for which you have been or are currently funded since your appointment at VCU. State the amount, the period, and the source of support. If you have received support from this or any other small grant program at VCU, list subsequent external grants applied for, whether or not funded, sources, dates, and amounts.

Has support for this or a similar project been requested from other internal sources?

(e.g. Cancer Center; Council for Community Engagement) or from external agencies (NIH, NSF, NEH, etc.)?

No  Yes

If yes, please state the funding source to which you applied, amount requested, and period of support.

List all other persons (faculty, students, technicians, house staff, etc.) who might be assisting or collaborating with you with on this project. If you are planning on having a co-investigator, please include a biosketch for that faculty member as well.

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| --- | --- | --- |
| Name | Rank | Role |
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Budget Data

Please provide the following budgetary information: Itemize and identify any item in excess of $500. (Chemicals may be grouped into major categories such as solvents, radio-labeled compounds, enzymes, fine biochemicals, antibodies, etc.)

EQUIPMENT (Itemize and Justify)

|  |  |  |
| --- | --- | --- |
| Equipment Item | Unit Price | Budget Request |
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Justification:

CONSUMABLE SUPPLIES (Itemize)

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| --- | --- |
| Supplies | Budget Request |
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Justification:

PERSONNEL (list all with description of role & % of time)

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| --- | --- | --- | --- |
| Name | Role/Position | Percent Effort | Budget Request |
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Justification:

ADDITIONAL EXPENSES (State purpose and justify)

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| --- | --- |
| Item Description | Budget Request |
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Justification:

TOTAL

PRIP Contribution

Dept./School contribution

(must be cash contribution; cannot be in-kind)

If this application is a revision of an application previously reviewed by the Presidential Research Incentive Program Review Committee, please detail the major revisions on a separate continuation page. This continuation page is not to be counted in the limit of 8 pages allowed for the description of the proposed research project. Additionally, please highlight in bold typeface the significant changes in the revised research application.

Research Plan

(8 pages maximum)

BIOSKETCH TEMPLATE

**NOTE: The Biographical Sketch may not exceed four pages.**

NAME:

POSTION TITLE & DEPARTMENT/SCHOOL:

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, include postdoctoral training and residency training if applicable.)

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| --- | --- | --- | --- |
| Institution or Location | Year | Degree | Field of Study |
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A. Personal Statement

Briefly describe why your experience and qualifications make you particularly well-suited for your role in the project that is the subject of the application.

B. Positions and Honors

List in chronological order previous positions, concluding with the present position. List any honors.

C. Selected Peer-reviewed Publications or other evidence of research as defined by the field of practice (e.g., juried exhibitions)

The list of selected peer-reviewed publications or manuscripts in press should be limited to no more than 15. Do not include manuscripts submitted or in preparation. You may choose to include selected publications/evidence of research based on recency, importance to the field, and/or relevance to the proposed project

D. Research Support

List both selected ongoing, completed and pending research/scholarly projects for the past three years that have been extramurally supported (Federal or non-Federally-supported). Begin with the projects that are most relevant to the research proposed in the application.

PRESIDENTIAL RESEARCH INCENTIVE PROGRAM PROPOSAL CHECKLIST

1. Grant Application components

Cover page with appropriate signatures (Page 1)

Previous/Current Funding & Collaborators

Budget Data Page

Research Plan (8 pages maximum)

Biosketch (4 pages maximum)

Mentor letter (for junior faculty at VCU 3 years or less) If requesting an exception to the mentor letter requirement, please describe.

`  Response letter (if a revised application – 1 page)

2.  No PRIP Award in past 3 or 4 years (depending on rank)

3.   Dollar limit of $50,000 ($30,000 PRIP request, $20,000 Dept. contribution)

4.  Departmental and/or School/College assurance of matching funds that are in “cash”

5.  All current and pending grants and contracts listed

When this application form is completed please convert it to a PDF file and add any support letters (i.e., mentor letter and/or response letter) as PDFs after this page. Then submit this single PDF to the dean of your school by close of business on the appropriate deadline date.