

**Internal Research Funding Programs – APPLICATION FORM**

***INSTRUCTIONS:*** See Program Guidelines for Details

Principal Investigator Bridge Program: <http://research.ucdavis.edu/wp-content/uploads/BridgeProgramGuidelines.pdf>

Publication Assistance Program: <http://research.ucdavis.edu/wp-content/uploads/PubAssistanceGuidelines.pdf>

All Others: <http://research.ucdavis.edu/wp-content/uploads/MatchFundsProgramGuidelines-revised-02.2012.pdf>

Submit this form to the Office of Research with additional required documents as necessary.

**Email *(preferred)*:** ORBusiness@ucdavis.edu

**Mail:** Office of Research, Attn: Business & Finance, 1850 Research Park Drive, Davis, CA 95618

|  |
| --- |
| **FUNDING PROGRAM REQUESTED: (*Please check one)*** |
| [ ]  Equipment Match [ ]  Cost Sharing [ ]  Multidisciplinary Proposal Support[ ]  Basic Research Grants [ ]  PI Bridge Program [ ]  Publication Assistance Fund |
| ***NOTE:*** *Additional internal research funding programs are administered by the Academic Senate Committee on Research* <http://academicsenate.ucdavis.edu/grants_awards/index.html> |
| **PRINCIPAL INVESTIGATOR AND CAMPUS ADMINISTRATIVE INFORMATION:** |
| Name: |   |  Title: |       |  E-mail: |       |  Phone: |       |
|  PRINCIPAL INVESTIGATOR |
| Name: |       |  Title: |       |  E-mail: |       |  Phone: |       |
|  CO-PRINCIPAL INVESTIGATOR |
| Name: |       |  Title: |       |  E-mail: |       |  Phone: |       |
|  CO-PRINCIPAL INVESTIGATOR |
| Administrative Unit: |       |  Contact name: |       |
| E-mail: |       |  Phone: |       |
| School/College: |       |  |
| Administrative Unit: |       |  Contact name: |       |
| E-mail: |       |  Phone: |       |
| School/College: |       |  |
|  |
| PROJECT INFORMATION: *(Complete all fields applicable to requested funding program)* |
| Title of Project: |       |
| Total amount of project: $ |       |  Published mandatory  cost sharing %: |       |  Mandatory cost sharing: $ |       |
| Sponsor/Agency:  |       |
| Program Announcement or RFP solicitation name and #: |       |
| Date due to sponsor:  |       |  Anticipated project begin date:  |       |
| Duration of time bridge funding is required:  |       |

|  |
| --- |
| **COST SHARING TO BE PROVIDED BY OTHERS:** *(When applicable)* |
| *Specify School, College, Division,* *Research Unit, 3rd Party, or other* |  |
|       |  $        | In-kind or contributed effort: (specify):       |
|       |  $        | In-kind or contributed effort: (specify):       |
|       |  $        | In-kind or contributed effort: (specify):       |
| ***NOTE:*** *If cost sharing is to be provided by School/College, Research Unit, or Third Parties, each must provide a letter of support.* ***For the PI Bridge Program, Dean’s signature is sufficient to confirm support from that School/College.*** |

|  |  |
| --- | --- |
| Department fund source:  |       |
| Dean's Office fund source (if applicable): |  |

***Please contact*** ***ORBusiness@ucdavis.edu*** ***for funding source questions***

|  |
| --- |
| ***complete If Requesting Matching Funds:*** |
| **If funding is requested for renovation of an existing facility or a new facility check here** [ ]  **and please describe:** |
| **Project Summary/Justification:** *(See specific program guidelines for additional required information)*      |
| **List of equipment and cost:** *(Required for Equipment Match)*      |

**SIGNATURES OF APPROVAL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Principal Investigator: |       |  |  | Date: |       |
|  | Name |  | Signature |  |  |
| Department Chair: |       |  |  | Date: |       |
|  | Name |  | Signature |  |  |
| Dean: |       |  |  | Date: |       |
|  | Name |  | Signature |  |  |