



Graduate Student Senate

O H I O U N I V E R S I T Y

THE GRADUATE STUDENT SENATE ORIGINAL WORK GRANT APPLICATION FORM

Submission

Quarter of Application

Resubmission

Previous Submission

Principal Investigator

Name

PID

Oak ID

Graduate Level

Year

College

Department

Administrator

Administrator's E-mail

Proposal

Title

Human Subjects

IRB #

Animal Subjects

IACUC #

Signatures

If selected for funding, I give permission to the GSS to use my proposal as an example during training and workshop exercises and to be made available for viewing on the GSS Website. I understand that the GSS will only make available the proposal itself and remove all personally identifiable information, including this cover page.

Permission

By signing this document, I agree to all the terms and conditions of the Graduate Student Senate Original Work Grant Program.

PI's Signature

Date

As the faculty advisor, I hereby certify that I have thoroughly read the attached proposal. The work described herein is academically sound and I am academically responsible for this student. By signing below, I confirm my understanding that the student, if funded, is required to submit a Final Report to the Graduate Student Senate. Failure to submit the Final Report will jeopardize future Graduate Student Senate funding opportunities available to graduate students in my department, as well as possibly jeopardize my department's ability to obtain University-wide funding.

Advisor's Signature

Date

Advisor's Name

As the Graduate Chair, I hereby certify that the above student is enrolled in the graduate program of this department and that I am fiscally responsible for this student.

Graduate Chair's Signature

Date

Graduate Chair's Name

Completed forms should be submitted to the Graduate Student Senate Office in 302 Baker Center.