PURF COVER PAGE

TITLE OF PROJECT: _____

NAME OF APPLICANT: _____
E-MAIL ADDRESS: _____
DEPARTMENT: _____
BUDGET: Total Request _____

_____
(May not exceed $1,500)

CLASS RANK: ◯ Freshman ◯ Sophomore ◯ Junior ◯ Senior

GPA:

EXPECTED DATE OF GRADUATION: *

* Note: Students must be enrolled and maintain undergraduate student status during the proposed project period.

FACULTY MENTOR INFORMATION:
NAME: _____
E-MAIL ADDRESS: _____
DEPARTMENT: _____
DEPARTMENT ADMIN: NAME & EMAIL _____

We the undersigned have read the PURF Guidelines and understand the responsibilities we undertake should funding be granted.
We certify that the application has been conceived, written and completed by the student.

Student signature:_____Date:_____
Faculty signature:_____Date:_____
Faculty Advisor's Dept. Chair signature:_____Date:_____

IRB AND IACUC APPROVAL:
To ensure that the University's compliance with all federal regulations, complete the checklist below.
Note: if your IRB/IACUC is not approved prior to submission put "pending" or "to be submitted" instead of approval number. Note: but funding will be withheld until notification of approval or exemption.

Yes	***No***	***Office of Research Compliance***	***Policy #***
☐	☐	Human Subjects in Research (including surveys, interviews, educational interventions): Institutional Review Board (IRB) Approval #: Expiration Date:	19.052
☐	☐	Animal Species: Institutional Animal Care & Use Committee (IACUC) Approval #: Expiration Date:	19.049

☐ **Optional:**
If selected for funding, I give permission to the Research Division to use my proposal as an example during training and workshop exercises. (Sign below)
Signature:_____ Date:_____