

C. For each previous SSAC research/creative activity grant listed above, briefly indicate the outcome (e.g., subsequent grant proposals submitted/accepted/rejected, papers written/presented, creative performances, etc.)

D. If you have submitted grant proposals to external funding agencies, please list information regarding the two most recent grant proposals. If none, please indicate "none."

Agency: _____

Agency: _____

Amount: _____

Amount: _____

Title:

Title:

Current Status: _____

Current Status: _____

Dates: _____

Dates: _____

E. Indicate current research/creative activity support below, including all start-up funding.

Agency: _____

Agency: _____

Amount: _____

Amount: _____

Title:

Title:

Current Status: _____

Current Status: _____

Dates: _____

Dates: _____

F. List up to five of your most relevant publications or other scholarly activities by providing complete citations. Indicate by an asterisk those which are clearly related to this project.

G. Cite up to five of your most recent publications or creative activities.

I. DESCRIPTION OF PROPOSED ACTIVITY:

A. Specific objectives.

B. The procedure you expect to follow. (Be specific, minimize technical jargon.)

C. Describe the facilities required for this project.

D. Relevance and significance of the proposed activity to you, your department and college, and UND, and anticipated outcomes.

II. BACKGROUND INFORMATION

A. What previous work have you done on this project, or work that is pertinent to it?

B. Cite no more than five relevant publications or creative activities of others. (Include the complete citation.)

C. What results have been obtained by others?

D. What is the current status of this study? (New, half-completed, etc.)

E. How long will it take to complete the study?

F. What plans do you have for publication or other utilization of your results?

G. Will you conduct the investigation yourself? Yes No

Will you work with co-investigators? Yes No

If there will be a co-investigator(s), please list. (If paid from the grant, show in proposed budget.)

Names:

H. Will you supervise the work of others?

Yes No

(If yes, please provide names, titles, and responsibilities).

I. Will students use the project toward a thesis or dissertation?

Yes No

For those activities that will be used toward a thesis or dissertation, an explanation of the relationship of the proposed work to the Principal Investigator's research/creative activity must be included.

J. Will this work be used by you in obtaining an advanced degree?

Yes No

If yes, provide the following information.

Degree _____ Year Expected _____

Granting Institution _____

K. Will this project, if funded, serve as a pilot study for a project that might later receive support from a federal agency or national foundation?

If yes, possible funding sources:

Yes No

L. Do you currently have external or internal funding to conduct this research or creative project? If so, please list the funding source(s) and detail similarities, differences and overlap.

Yes No

Agency _____

Amount _____

Title _____

Agency

Amount

Title

Agency

Amount

Title

M. Have you requested, do you have pending, or intend to request, funds from external or other internal sources for this project? (If so, list granting agency, amount, title of project, and detail similarities, differences, and overlap.)

Yes No

Agency

Amount

Title

Agency

Amount

Title

Agency

Amount

Title

III. FINANCIAL REQUIREMENTS

A. Proposed budget. Itemize in the following table. All items must be clearly related to the research/creative activity. If there are unusual items in your budget, please justify. If you are requesting funding for equipment, indicate the specific importance of the equipment to your project. Also, if the equipment is already available in your department, justify your need for purchasing additional equipment. The maximum allowed for New Faculty Scholar Awards is \$5,000.00.

	BUDGET ELEMENT	REQUESTED AMOUNT	APPLICANT CONTRIBUTIONS	TOTAL
A.	PERSONNEL EXPENSES:			
	Salaries and Wages - Support Staff			
	Fringe Benefits			
	TOTAL PERSONNEL EXPENSES			
B.	OPERATING EXPENSES:			
	Travel (Domestic)			
	Travel (Foreign)			
	Communications			
	Insurance			
	Data Processing			
	Office Supplies			
	Fees			
	Instructional			
	General			
	TOTAL OPERATING EXPENSES			
C.	EQUIPMENT			
	Equipment < \$5000			
	Equipment > \$5000			
	TOTAL EQUIPMENT COSTS			
	TOTAL COSTS			

B. Budget justification/explanation.

I have reviewed the Guidelines for New Faculty Scholar Award and agree to abide by them.

Signature of Applicant

Applicant Checklist:

1. This form.
2. Letter from your chairperson.
3. Applicant's resume. This should include a list of publications/creative activity, grant activity, and any other information (e.g., awards, honors, education) relevant to this application.
4. Submit original of the application to the UND Office of the Vice President for Research & Economic Development, 103 Twamley Hall or Stop 8367, also submit an application electronically to vpr@research.UND.edu.