

₱residential Research Grant Cover Page

(Please complete and send with application to gradschool@gvsu.edu)

Student Name:	G Number:
Phone:	E-mail:
Degree program:	
Title of Research Project:	
Does this project require approval from: F	Human Poscarch IPR
	nstitutional Animal Care & Use Committee
Budget Summary: Project request (i.e. Supplies, equi	ipment) (Maximum \$1,500) \$
Other funding support (awarded or	r pending) \$
Source of other funding support (a	warded or pending)
Signatures:	
Student By checking this box, I acknowledge that this proposal contain required components including an abstract, methodology, and budget, and that a letter of support will be submitted by my research advisor.	
Research Advisor By checking this box, I acknowledge that I have read this propand attest to its scholarly merit.	Date
Unit Head By checking this box, I acknowledge that I have read this propand attest to its scholarly merit.	Date