

**MultiCampus Research Incentive Fund (MRIF)  
Application Form  
2001-2002 Competition**

TITLE OF PROPOSAL \_\_\_\_\_

**LEAD FACULTY APPLICANT**

Name: \_\_\_\_\_

Campus address: \_\_\_\_\_

Phone/Fax: \_\_\_\_\_ / \_\_\_\_\_

Email address: \_\_\_\_\_

**LIST OF OTHER PARTICIPANTS AND CAMPUS AND/OR LABORATORY AFFILIATIONS**

Name	Campus/Laboratory
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Amount Requested:** \$ \_\_\_\_\_ **Proposed Duration of Award:** (check one) 1 year \_\_\_\_\_ 2 years \_\_\_\_\_

**List Other Sources of Funding and Amounts (Pending, Committed, or Received) Relevant to this Project:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Name of Campus Contracts and Grants Contact/phone/email:**

\_\_\_\_\_

Signature of Endorsement by Lead Campus Research Vice Chancellor \_\_\_\_\_ Date \_\_\_\_\_

**ABSTRACT (Proposal abstract must fit within box below and must be in non-technical language.)**

***Proposals that depart from the requirements listed below or fail to provide all requested information will be disqualified. Please use checklist below to determine if these requirements are met.***

1. Both sides of this application cover sheet are completed
2. Narrative description of project does not exceed four (4) pages
3. One-page budget and budget justification included
4. Clear statement as to why project cannot be accomplished without MRIF funding
5. Proposal narrative description is in non-technical language
6. Intended extramural research funding opportunity is clearly identified
7. Statements from faculty and/or DOE Laboratory scientists confirming their intent to participate in the research collaboration
8. Signature of Research Vice Chancellor is affixed to this form.

\_\_\_\_\_  
***Signature of lead applicant***

\_\_\_\_\_  
***Date***

**Budget** (*Two-year projects must include a budget for each year*)

**Budget Justification**

