



**STUDENT RESEARCH GRANT PROGRAM:**  
*Research Application*

**PERSONAL DATA**

A. Student's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Student I.D. Number: \_\_\_\_\_ Major: \_\_\_\_\_

B. Classification:  Undergraduate  Masters  Doctoral

Date of Application: \_\_\_\_\_

C. Number, Name, and Credit Hours of Course Applying to this Research:

Number of Hours of Current Enrollment: \_\_\_\_\_

**RESEARCH PROPOSAL INFORMATION**

D. Total Amount of Support Requested: \$ \_\_\_\_\_

E. Title of Proposed Research Project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

F. Project Description: On an attached page, discuss the following issues concerning your research proposal. (1) Objectives of the Project, (2) Procedure to be Followed, (3) Significance of the Work, and (4) Importance of Financial Support Requested from the Office of Research.

G. Proposed Starting Date: \_\_\_\_\_

Planned Date of Completion: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

H. Describe Type and Amount of Support Requested From Office of Research: \*

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

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- I. List Type, Extent, and Source of Other Support to be provided for this Research Effort: \*
- J. Briefly Explain Efforts Made to Obtain Requested Support for this Research from Other Sources Such as Department, Dean, Graduate School, Outside, etc.:

**RESEARCH COMPLIANCE INFORMATION**

- K. Are Human Subjects Involved in this Research?

YES  NO  PROTOCOL No. \_\_\_\_\_

If yes, a copy of the approval letter from the IRB must be attached. If you have not already received approval, you must also submit an IRB protocol with or at the same time you submit your student grant application. The IRB application form and instructions can be found by going to the Office of Research and Sponsored Programs website here: <http://www.utulsa.edu/research/Office-of-Research-and-Sponsored-Programs/Research-Integrity-Compliance-and-Certification/Protection-of-Human-Subjects.aspx>

If you have not received approval or submitted a protocol, please contact Carmen Schaar-Walden at x3310 or via email at <mailto:carmen-schaar-walden@utulsa.edu>.

- L. Are Chemical Involved in this Research?

YES  NO

If yes, the department chairperson must initial the following line as verification that the applicant has attended a Hazardous Material Training Session and/or a laboratory safety session. The department has a list of departmental faculty, staff, and students who have attended a safety seminar.

**Department Chairperson** \_\_\_\_\_ **Date Attended:** \_\_\_\_\_

- M. Are Animals Involved in this Research?

YES  NO  PROTOCOL No. \_\_\_\_\_

If yes, a copy of the approval letter from the IACUC must be attached. If you have not already received approval, you must also submit an IACUC protocol with or at the same time you submit your student grant application. The IACUC Animal Use Form and instructions can be found by going to the Office of Research and Sponsored Programs website here: <http://www.utulsa.edu/research/Office-of-Research-and-Sponsored-Programs/Research-Integrity-Compliance-and-Certification/Welfare-of-Laboratory-Animals.aspx>. If you have not received approval or submitted a protocol, please contact Carmen Schaar-Walden at x3310 or via email at <mailto:carmen-schaar-walden@utulsa.edu>.

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**N. INSTITUTIONAL BIOSAFETY REVIEW:** If your research involves the use of infectious agents, select agents and toxins, human or endothermic vertebrate materials (including blood, body fluids, cells and tissues), recombinant DNA, synthetic nucleic acid molecules or transgenic animals, the protocol may require Institutional Biosafety Committee (IBC) review and approval. Please contact Dr. Estelle Levetin (x2764) if your research involves any of these items. If IBC approval is necessary, a protocol must be submitted with this application.

***As Departmental Chair, please sign below to confirm that you have reviewed this grant application for Biosafety compliance and have determined that:***

YES  this grant application has been forwarded to the IBC Chair for further review

NO  this grant application *does not* need to be forwarded to the IBC Chair for review

**Department Chairperson** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IBC Chairperson approval** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(if applicable and the "YES" box is marked above)*

O. Have you participated in the Annual Student Research Colloquium that began in Spring 1998? YES  NO

Have you previously received a Student Research Grant? YES  NO  Year \_\_\_\_\_

**If yes, have you submitted your final research report to the Research Office?** YES  NO

**P. APPROVALS:**

In approving this application, I confirm that my division or college is unable to provide the financial support for the items requested in this application.

**Project Adviser** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Letter of recommendation by Adviser must accompany application.)

**Department Chairperson** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Collegiate Dean** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Q. ACTION TAKEN BY EVALUATION COMMITTEE:**

Declined \_\_\_\_\_ Approved \_\_\_\_\_ Amount Granted \$ \_\_\_\_\_

\* If more space is needed, please use an extra page.