



COLLEGE OF ARTS AND LETTERS RESEARCH SUBSIDY

Faculty Member's Name: _____

Faculty Member's Department: _____

Faculty Member's Rank: _____

Project Title: _____

Date that Last Previous Research Subsidy Was Received (or "N/A"): _____

Purpose of Subsidy (No More Than 35 Words):

Total Cost of Project: \$ _____

Amount Sought: \$ _____

Additional Sources of Funding for Project

Faculty Start-Up Funds: \$ _____

Faculty Discretionary Funds: \$ _____

Departmental Funds: \$ _____

Other

Source: _____

Amount: \$ _____

Faculty Member's Signature

Date

Chair's Signature

Date

Dean's Signature

Date

- This form, the project narrative, and the condensed CV should be sent as one file to the Associate Dean for Research, Graduate Studies, and Faculty Affairs. The PDF should be named using the format CALRS_Fiscal Year_Last Name_First Name, e.g., CALRS_24_Delbrugge_Laura. (Remember that fiscal years run from July 1st to June 30th and that FY24 is the fiscal year that *ends* in 2024.)