School of Life Sciences Undergraduate Grant Application - Research Supplies or Travel

(Applicant must have a major in the School of Life Sciences. SOLUR Researchers/Fellows and IMSD participants are not eligible for this grant.)

Please print

Circle Application Cycle Due Date: 
October 15, 2015  
February 15, 2016  
June 5, 2016

Circle Request for What Type of Funds:  
Research Supplies  
Travel

Student Name: _______________________________  
Student ID #: _______________________________

Student SOLS Major: _______________________________  
Email Address: _______________________________

Faculty Mentor Name: _______________________________  
Faculty Mentor Email Address: _______________________________

Title of Research Project: _______________________________

I am Registered For (please circle one): – must be registered for course in semester applying for funding

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>BIO 310</td>
<td>MIC 401</td>
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<tr>
<td>BIO/MIC/MBB/PLB 484</td>
<td>BIO/MIC/MBB/PLB 492</td>
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<td>BIO/MIC/MBB/PLB 495</td>
<td>BIO/MIC/MBB/PLB 496</td>
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<td>BIO/MIC/MBB/PLB 499</td>
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VOLUNTEER (SOLUR Volunteer form must be on file in office for the semester applying)  
OTHER: ____________________________ (Subject to approval)

Number of credit hours registered for or hrs/week (circle which) worked for this experience: ____________________________

Funds requested from SOLUR: $ ________________

(Requested amount may not exceed $250. For supply request, amount includes item(s), shipping/handling charges, and taxes. The Faculty Mentor will be responsible for any amount over $250 and must provide account number before order will be processed.)

Amount of funds supplied by Faculty Mentor or other source for this project or travel: ____________________________

Account number for overage or other funds provided by Faculty Mentor or other source: ____________________________

Contact person for account if not Faculty Mentor:

(If additional funds are available, please indicate in your Budget (see below) how SOLUR funds would be spent specifically.)

In addition to this application form, the Student must submit 1) a one-page (can be single-spaced) proposal (see details below) and 2) ensure that a recommendation letter from his/her Faculty Mentor is sent to SOLSEP@asu.edu before the application deadline. Students can only receive one award (supply or travel) per academic year.

- For RESEARCH SUPPLIES: The Student’s proposal must outline the merits of the research being done, highlight the benefits that such work provides to the career path of the Student, and provide an itemized budget and justification of projected project expenditures. Also submit a print out from the Vendor(s) website showing the cost of the item(s) being requested. Please note: All items purchased using this grant or being reimbursed for by this grant become the property of ASU, the faculty mentor, and their lab. The equipment or supplies and anything made/generated using them is (are) to remain with the mentor/lab at the conclusion of the research project.

- For TRAVEL: The Student’s proposal must provide justification as to why the Student should attend the conference/meeting, how attendance at the conference/meeting will aid the Student’s career path and research, the name and web site of conference/meeting including dates and location, who else will be attending the conference from ASU, and an itemized budget of projected expenditures. If presenting at the conference/meeting, Student must indicate if it is a poster or oral presentation and provide a copy of the title, authors, and abstract submitted to the conference/meeting. Please note: Meeting must be held on or after the grant deadline.

Submit Completed Form and Supporting Documentation to LSC 240 By the Due Date Listed Above.

(* * Current SOLUR participants at the Fellow and Researcher levels and IMSD participants are not eligible to apply for this grant. *)

I hereby affirm that I am a SOLS major and that all information provided on this form and in my grant proposal is accurate. Should I receive this grant, I commit to using award monies solely for the purposes of my research experience.

Research Supplies: I understand that, if approved, funding for the specified research supplies listed in my budget must be spent/purchase request submitted within three weeks of award notification or it will be forfeited. Any unspent funds will be forfeited. Award cannot be transferred.

Travel: I understand that, if approved, travel is awarded for a specific conference/meeting. Should I not attend the approved conference/meeting, the award will be forfeited. Any unspent funds will be forfeited. Award cannot be transferred.

(required summary of the outcome and impact of this request by the end of the current semester for a supply request or by the end of the semester the travel took place."

Student Signature: _______________________________  
Date: _______________________________

TO BE COMPLETED BY SOLS:

<table>
<thead>
<tr>
<th>Approval</th>
<th>Amount: $ ________________</th>
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Comment: ____________________________  
Date: ____________________________

Approval Signature: ____________________________  
Date: ____________________________