Please fill out all appropriate information on this form and submit a signed, scanned copy with your proposal.

**I. Project Information**:

Project Title:

Funding Request: $ Submission Date: Project Dates/Duration:

Will humans, animals or recombinant DNA be studied? If YES,include a copy your institution's research-risk review board approval and submit it with your proposal.  Explain exemptions.  Contact the chair of the Research Grants Committee with questions*.*

**II. Applicant Information.** Applicant must be an IAS member for at least one year, a new member and first time applicant, or a student sponsored by an IAS member; co-applicants are considered equal participants in the project:

Name: Title:

 If student, check: [ ] undergraduate [ ] masters candidate [ ] PhD candidate

Institution: Department:

Address: Town, State Zip:

Phone: E-mail:

Co-applicant Name(s; if appropriate):

I/We affirm that all information in this application is correct. We agree to meet IAS program requirements (see http://www.indianaacademyofscience.org/grants.html) for the conduct of this research and concluding the grant.

(applicant signature and date) (co-applicant signature and date) (co-applicant signature and date)

**III. Sponsor Information**: Students, postdoctoral associates, non-permanent faculty members or other applicants not otherwise chiefly responsible to the institution for the research program must have a sponsor who is responsible to the institution for the research program and has been an IAS member for at least one year or is a new member who has not previously applied for an IAS grant.

Name: Title:

Institution: Department:

Address: Town, State Zip:

Phone: E-mail:

I agree that, to the best of my knowledge and understanding, all information in this application is correct, that I am responsible for and have agreed to sponsor this research, and I will guide the applicant(s) to meet the requirements stated by the IAS (see http://www.indianaacademyofscience.org/grants.html) for the conduct of this research, its reporting, and conclusion of the grant.

Sponsor's Signature: Date:

**IV. Previous IAS Support?** Have applicant(s),the sponsor, or researchers directly associated with the sponsor’s research effort received IAS grant funds in the past 5 years?: *If “yes”, answer below. Note: report(s) for previous grants must be on file or submitted with this application.*

a. date(s) previous grants awarded:

b. request for (circle one): NEW, RENEWAL (go beyond prev. IAS funded work), ADDED (add $ to prev. award)

c. previous IAS presentations or publications? \_\_\_\_ If YES, Previous IAS presentations or publications for the PI, Co-PI(s) and/or sponsor should be listed and submitted with this proposal.

**V. Institutional Approval and Contact Information**. Provide the name and contact information of the official responsible for approving this application on behalf of the institution.

Name: Title/Department:

Phone: E-mail:

Address: Town, State Zip:

Signature: Date:

**VI. Financial Information**. Provide the following information of the official to whom any award should be sent.

Name: Title/Department:

Phone: E-mail:

Address: Town, State Zip:

**Applicants should submit this form as a pdf with the signatures.**

**IAS Senior Research Grant Form Revised: January 2017**