University Research Council

Funds Request—College Level

Title of Project		
Name of faculty member(s)	Department(s)	
Breakdown of costs:		
Current or possible sources of additional funding sive of UCA, i.e. grant for which you have or will a sation:		
Approvals Recorded:		
Department Chair		Date
College Research Committee Chair		Date
Dean of the College		Date
Dean of the conege		Date