

# **APPLICATION FOR PSC-CUNY 33 RESEARCH AWARD PROGRAM**

Your application must reach the Research Foundation with authorized signatures, by the October 15<sup>th</sup> deadline. They are usually routed through the Grants Office on your campus before then. Check if they have an earlier deadline.

**LATE APPLICATIONS WILL NOT BE ACCEPTED.**

You may also submit the names of competent reviewers for your proposals on a separate cover. Please also state any relevant personal or professional relationship between yourself and potential reviewers. The panel is not required to use them but they may.

**\*\*Indicate in the relevant sections: publication, performances, works etc. resulting from PSC-CUNY funding.**

**We have included this year a copy of the acceptance form with the application.  
Please make sure to sign it.**

**We have also revised the budget page to more accurately reflect the budget you will receive - be sure to justify items requested.**

Please do not submit this cover sheet with your application. Thank you.

**THE CITY UNIVERSITY OF NEW YORK**  
**APPLICATION FOR PSC-CUNY 33 RESEARCH AWARD PROGRAM**

Control Number: (For Office use only)	Name: (last) (first) (no initials)	Review Panel: (not division)	
	Co-PI: (Attach copy of this page with CO-PI info)		
Rank: <input type="checkbox"/> Distinguished Professor <input type="checkbox"/> Professor <input type="checkbox"/> Associate Professor <input type="checkbox"/> Assistant Professor <input type="checkbox"/> Lecturer <input type="checkbox"/> Instructor <input type="checkbox"/> Other _____	Tenure: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> CCE	Type of Award: ( <b>choose one</b> ) <input type="checkbox"/> One year <input type="checkbox"/> Two year <input type="checkbox"/> Renewal (one consecutive year only) # _____ of previous grant <input type="checkbox"/> Out- of-Cycle (date of hire: _____ ) <input type="checkbox"/> Emergency (justification attached)	
Department:	College:	Subjects (where college Approval is required) <input type="checkbox"/> Human <input type="checkbox"/> Animal	Progress Report: <input type="checkbox"/> Attached <input type="checkbox"/> Will Follow By December 15 <sup>th</sup>
Supplementary Materials attached : <input type="checkbox"/> Yes <input type="checkbox"/> No (Do not check off if only appendices are attached)	Home Address:  Telephone: (H) (W)	Email Address:  Fax: Amount requested: \$ _____ yr. 1 \$ _____ yr. 2	
Title of Proposed Project:			

*Brief Abstract:*

Principal Investigator: I understand that: (1) The award may be revoked in whole or in part should my relationship with the City University cease to exist provided that such revocation shall not include any amounts obligated previous to the effective date of revocation. (2) The general terms and conditions of this proposal as stated in the application form, program guidelines and elsewhere have been read and accepted. (3) Any funds granted as a result of this application are to be expended for the purpose outlined herein in accordance with University and Foundation policies, and any funds not expended for this purpose shall revert to the PSC-CUNY Research Award Program upon completion or termination of award, whichever is earlier. (4) Equipment purchases are covered under Section 4.3 of *Project Director's Guide*.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Campus Endorsement: This is to certify that the applicant is authorized to conduct the study described by the accompanying proposal of this campus, and that the undersigned is satisfied that the scope of the applicant's project will not interfere with his/her professional duties. *Release time, where requested, has our approval.* Other support will be provided on campus to assist this study.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**PSC-CUNY 33 RESEARCH AWARD PROGRAM PROPOSED BUDGET**

<b>Name:</b>		1 <sup>st</sup> year _____	2 <sup>nd</sup> Year _____
Principal Investigator Academic Year Salary \$ _____ <i>(only for those requesting summer salary)</i>		Requested Amount	
Principal Investigator	<i>(summer salary-maximum \$3,000)</i>		(5400)
	<i>Fringe Benefits 22%</i>		(5955)
Release Time	<i>(\$3,000)</i>		(5800)
	<i>Fringe Benefits 28%</i>		(5950)
Research Staff			(5410)
	<i>Fringe Benefits 9%</i>		(5940)
Equipment	<i>(item \$1,000+)</i>		(7900)
Expendable Supplies/Small Equipment			(6200)
Travel	<i>(mode, destination, &amp; estimated per diem)</i>		
Domestic			(6910)
Foreign			(6920)
Local			(6930)
Payment to Subjects			(7020)
Manuscript Prep/ Publication			(8040)
Other			
	<b>Total Amount Requested</b>		

**BUDGET JUSTIFICATION:** Please justify all major items, but limit to space provided. Also, supply a job description for all Research Assistants.

**BIOGRAPHICAL SUMMARY:**

**NAME:** \_\_\_\_\_

**EDUCATION**

INSTITUTION	DEGREE	YEAR	FIELD of STUDY

**RESEARCH & PROFESSIONAL EXPERIENCE:** Summarize research and professional experience which is pertinent to this proposal. List in chronological order the titles and complete references to publications in the past three years and to representative earlier publications important to this application. Do not exceed this page. **DO NOT ATTACH CURRICULUM VITAE.**  
**(Use an asterisk (\*) to the left of publications, performances or works which resulted from PSC-CUNY funding)**

**OTHER FUNDING:**

NAME \_\_\_\_\_

<b>TOTAL NUMBER OF PRIOR PSC-CUNY AWARDS</b> _____
--

**PSC-CUNY AWARDS (over past five years)**

DATE:	TITLE	NEW or RENEWAL	AMOUNT

**EXTERNAL RESEARCH GRANT/AWARD PROPOSALS**  
(over past five years; indicate funded/not funded)

**Place an asterisk (\*) to left of awards that resulted from PSC-CUNY funding**

DATE	TITLE	FUNDING SOURCE	AMOUNT

**PROPOSALS UNDER REVIEW OR IN PREPARATION**

DATE	TITLE	FUNDING SOURCE	AMOUNT

**PLEASE ATTACH PROJECT DESCRIPTION. (MAXIMUM FIVE PAGES) NO APPLICATIONS WILL BE ACCEPTED WITHOUT A PROJECT DESCRIPTION.**

**ACCEPTANCE OF PSC-CUNY RESEARCH AWARD**

NAME: \_\_\_\_\_ AWARD NO: \_\_\_\_\_

SUMMER MAILING

ADDRESS: \_\_\_\_\_

Number & Street

City

State

Zip

COLLEGE: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

**CONDITIONS OF AWARD ACCEPTANCE - PSC/CUNY RESEARCH AWARD 33**

1. The Principal Investigator agrees to incur expenses in the name of the Research Foundation only within the limit of the funds available to the project and for the purposes specified in the attached budget. Any commitment made by the Principal Investigator resulting in an overdraft will be the Investigator's personal responsibility and obligation to reimburse the Research Foundation.
2. The Principal Investigator has the responsibility to give adequate prior notification to all individuals employed on this grant of the termination date of their employment. Such termination may result from the exhaustion of grant funds, completion of employee's work, end of grant period or other reason.
3. The Principal Investigator is aware that summer salary is awarded for July and/or August 2002. (S)He agrees that if summer salary is accepted for either or both months, not to accept any other employment while receiving this salary.
4. The Principal Investigator agrees to notify the Research Foundation if his/her budgeted summer salary gives a total annual salary of more than \$55,000 or if he/she draws summer salary from other sources (see PSC-CUNY *Guidelines*), so that budget adjustments can be made. Note that the summer salary is based on gross academic year salary as of January 1, 2002. Faculty on sabbatical, however, should take into account gross earnings, from all sources, for the calendar year in which they request summer salary, 2002.
5. The Principal Investigator agrees to notify promptly the Research Foundation of any changes in status as a member of the CUNY full-time instructional staff so that the Research Foundation can terminate the award. Expenditures properly encumbered before the effective date of the change will be reimbursed. Award recipients who will not be reappointed September 1, 2002, are entitled to use their research award funds until the termination of their current appointment.
6. The Principal Investigator has the responsibility for obtaining approval from the College Committee for the Protection of Human Subjects or the College Committee on Laboratory Animal Care, where appropriate and agrees not to proceed without such approval.
7. The Principal Investigator is aware that Equipment acquired by PSC-CUNY Research Award Program grants may be transferred to your college for use in your department at project termination.

I hereby accept the above PSC-CUNY Research Award, including the above conditions, and agree to abide by the applicable Research Foundation and University policy statements, the PSC-CUNY *Guidelines* for 2001-2002 governing the program, and any policy statements which may be issued by the University Committee on Research Awards during the Grant period.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**N.B.:** Funds will be made available on the starting date of this award provided this signed statement has been received by the Research Foundation and where necessary APPROVAL HAS BEEN RECEIVED FROM THE COLLEGE COMMITTEE FOR THE PROTECTION OF HUMAN SUBJECTS OR THE COLLEGE COMMITTEE ON LABORATORY ANIMAL CARE, AS NECESSARY.

If not attached to proposal, this Acceptance **must** be received Within 90 Days of the Grant Start Date, July 1<sup>st</sup>.

