



WILLIAM & MARY

Graduate Arts & Sciences

Graduate Student Research Grant Application Form

Each fall, spring, and summer, the Office of Graduate Studies and Research awards support to assist A&S graduate students with expenses directly related to the conduct of research. Example activities include the collection of data at museums or archives, purchase of supplies or equipment, and travel to sites in the field. These grants are capped at \$350.

Students are encouraged to seek additional or matching funds from other sources, and to indicate amounts that have been requested/awarded in the application form. Multiple funding sources are viewed favorably in evaluating applications. Students who have not yet received a Graduate Student Research Grant will be preferred over students who have.

Note that funding for conference travel is handled separately through the Graduate Student Association Supplemental Travel program: <http://wmpeople.wm.edu/site/page/gsa/funding>

Instructions

For eligibility, procedures, restrictions, semester deadlines, and other information, please refer to the web page for this funding program:

<https://www.wm.edu/as/graduate/financialsupport/researchgrants/index.php>

Return both the completed Grant Application form and the attached Research Grant Institutional Compliance Committees Form to the Office of Graduate Studies and Research by the semester deadline. All students must include the Institutional Compliance Committees form.

Signatures required:

- Student applicant;
- Applicant's advisor/committee chair.



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OFFICE OF GRADUATE STUDIES AND RESEARCH
Stetson House, 232 Jamestown Road
757-221-2467 | dean-gsr@wm.edu

Graduate Student Research Grant Application

Student's Name: _____ Banner ID #: _____

W&M Email: _____ @email.wm.edu

Student's Dept/Program: _____ Degree Sought: M.A./M.S./MPP Ph.D.

Funding Sought for: Fall Spring Summer Year : _____ Expected Graduation Date: _____

Please provide a summary budget of costs for your research project, as indicated below:

Category	Description	\$ Cost
1. Transportation		
2. Lodging		
3. Meals		
4. Supplies		
5. Fees/payments		
6. Other (itemize)		

Total \$ Cost: _____

Graduate Student Research Grant Application cont.

Additional Funding Sources	\$ Amount Requested	\$ Amount Awarded or Notification Date

Please describe your research project below, and explain how the funding will help you achieve your goals. If you need more space, you may attach to the application form a narrative (up to 1 page).

Student Signature

Date

The advisor's signature below attests the following is true and accurate:

- *The student is in good academic standing; and*
- *I have read this application and endorse it.*

Advisor/Committee Chair Signature: Print Name | Signature

Date

OGSR Use Only
<input type="checkbox"/> Approved <input type="checkbox"/> Denied Amount \$ _____



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Research Grant Institutional Compliance Committees Form

Use this form when submitting a request for research funds (e.g., A&S Graduate Student Research Grants). Answer each question on the form by checking the boxes.

If you answer "yes" to any question on the form:

- Go to the website [Institutional and Federal Compliance Requirements](#) and submit the necessary forms to the appropriate committee(s);
- Enter the assigned protocol number(s) in the appropriate box(es) on this form.

Completing and signing this form certifies that you have requested approval from the appropriate committee(s) *before* submission of a research grant application to the Office of Graduate Studies and Research.

Final approval of your research grant will await approval by the appropriate committee(s).

Instructions

Deadline: To be submitted as part of your application for a research grant handled by the OGSR.
Due by the research grant deadline posted online.

Return completed form to the Office of Graduate Studies and Research.

Signatures required before returning form:

- Student;
- Student's advisor.



Research Grant Institutional Compliance

Student's Name: _____ Banner ID #: _____

Student's Dept/Program: _____

Yes No	Question	Oversight Committee	Protocol number assigned (e.g., IACUC-2018-04-12-7939-mspark)
<input type="checkbox"/> <input type="checkbox"/>	Will this project involve surveys, testing of human subjects, or collection of information from living human beings?	Protection of Human Subjects Committee	
<input type="checkbox"/> <input type="checkbox"/>	Will live vertebrate animals used in this project?	Institutional Animal Care and Use Committee	
<input type="checkbox"/> <input type="checkbox"/>	Will this project use any (a) recombinant DNA molecules (including transgenic animals or the transfection of cell lines), (b) infectious agents, (c) human tissue or body fluids (including saliva, urine, blood, semen, or primary human cell cultures), or (d) wild-caught or random source animals or animal tissue (for anyone employing animals that may carry zoonotic disease)?	Institutional Biosafety Committee	
<input type="checkbox"/> <input type="checkbox"/>	Will this project involve research with radioactive materials?	Institutional Radiation Safety Committee	

Student Signature

Date

Faculty Research Advisor: Print Name | Signature

Date