

Custom Textbook Fund Grant Application

(Submit to the Committee Chair)

Applicant Name(s): _____

Have you received funding from this committee before? ___Y ___N

If yes, when and for what purpose? _____

Applicant Status (check one): Undergraduate ___ Graduate ___ Faculty ___

If a Student is Applying:

Student's Mailing Address: _____

Student's Email: _____ Student's M#: _____

Faculty Sponsor: _____

Title of Project: _____

Total Amount Requested: _____ Date Funds Will Be Needed: _____

Important Project Dates (beginning, end, dates of presentations, travel, etc.):

Have Other Sources of Funding Been Pursued? If yes, which source(s)? When will funding decisions be announced?
(For Travel and Research: Undergraduates should contact MTSU's Undergraduate Research Center and/or URECA for funding, and Graduate students should contact the College of Graduate Studies).

Has additional funding already been secured from another source? (If yes, how much, from which source?)

In the space below (and on additional sheets if needed), outline the following:

1. Project Description (including purpose and objectives, program design, time frame, etc.). If the project is travel to a conference or interview, please provide documentation (e.g., acceptance letter, invitation to interview). If the project is undergraduate student research, please elaborate on the student's role in the project.
2. Description of how the project satisfies the fund's purpose and priorities (e.g., enrichment of graduate/undergraduate education, expected impact on students, number of students impacted)
3. Detailed budget. Explanation (where necessary) of budgeted items. Provide evidence of cost when appropriate (e.g., receipts). **Travel: A Request for Travel Authorization Form must be submitted with this grant application 2 weeks prior to travel--include documentation of conference registration costs and possible airfare and hotel costs. After travel is completed, a Middle Tennessee State University Claim for Travel Expenses must be submitted to the Psychology Department Office for reimbursement of expenses**—included must be **itemized** receipts for hotel, airfare, cab, etc. (for travel reimbursement questions, please contact Cotonya Malone at Cotonya.Malone@mtsu.edu).

Applicant Signature

Date

Faculty Sponsor Signature

Date

For Department use only:

Approved _____

Not Approved _____

Amount _____

Date _____

Dept. Chair _____

Date _____