

UNIVERSITY RESEARCH/CREATIVE AWARD (URCA) APPLICATION

WSU PROP #:  Date:  Amount Requested:

Name:  myWSU#:  Date Joined WSU:

Rank/Title:  Department/College:

Project Title:

Project Period From:  To:

Check here if teaching in the Summer

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Check appropriate box(es) if this proposal includes any of the items listed below. The cost of animal care must be included in the proposal budget. Pls whose research/work generates radioactive/hazardous waste should ensure that funds are available for appropriate hazardous waste disposal (either grant funds or SRO funds).

Human Subjects

Biological Materials

Infectious Agents

Animal Subjects

Clinical Trials

Proprietary Information

Prior URCA, MURPA, ARCS or PCSI Grants: **You must include a copy of your most recent Final Report with your application.**

Fiscal Year	Amount	Type (URCA, MURPA, ARCS, PCSI)	Did this internal award lead to external funding? If so, please provide the name of the external sponsor and award amount .

**If you have received additional internal awards, please add them to the Supplemental Internal Awards page and ~~WWSB/DB~~ ~~WRWK~~ application/IRUP.**

Final Report(s) Filed:  Yes  No

**Scholarly Activity and/or Creative Work and resulting from the last three URCA/MURPA/ARCS/PCSI (e.g. papers, books, presentations, performances, grant applications, etc.)**

**Scholarly Activity:**

**Creative Work:**

\*\*\*FORM WILL LOCK ONCE APPLICANT SIGNS\*\*\*

Applicant Signature:  Date:

By signing this page, you are endorsing the project for consideration by the Faculty Support Committee.

CHAIRPERSON:  DATE:

DEAN:  DATE:

ELECTRONIC APPLICATIONS MUST BE SUBMITTED TO [PROPOSALS@WICHITA.EDU](mailto:PROPOSALS@WICHITA.EDU) AS ONE PDF DOCUMENT.

HARDCOPY APPLICATIONS MUST BE SUBMITTED TO THE OFFICE OF RESEARCH, - \$ 5 ' , 1 ( + \$ // 2 5 CAMPUS BOX 7, AS ONE SINGLE-S IDED DOCUMENT.

APPLICATIONS MUST BE RECEIVED NO LATER THAN 5:00 P M ON THE DUE DATE.