



**SUNY College at Old Westbury**  
**Faculty Development Grants 2019-20**  
 Application Cover-Page

Office Use Only

**Descriptive**

**Project Title:** \_\_\_\_\_

**Applicant(s) and Certification Signature(s):** *By signature below, I certify that I have submitted a written report for all past funding I have received under the College's Faculty Development Grant program.*

Lead Applicant's Name \_\_\_\_\_ Dept \_\_\_\_\_ Signature \_\_\_\_\_  
 E-mail address: \_\_\_\_\_ Daytime tele: \_\_\_\_\_

Faculty Collaborator's Name \_\_\_\_\_ Dept \_\_\_\_\_ Signature \_\_\_\_\_

Faculty Collaborator's Name \_\_\_\_\_ Dept \_\_\_\_\_ Signature \_\_\_\_\_

<b>Amount Requested</b> \$ _____	<b>Project Period:</b> ____ / ____ / ____ - ____ / ____ / ____
<b>Primary purpose of this FDG application.</b>	
<input type="checkbox"/> Seed money to initiate or advance an external grant application. <b>IMPORTANT:</b> Must identify, below, the organization(s) and approximate date(s) to which you expect to submit a grant proposal. <b>Highest Priority.</b> _____ _____ _____	
<input type="checkbox"/> Financial support for professional development efforts intended to result in a publication, presentation, performance, exhibition or comparable activity.	
<input type="checkbox"/> Financial support for classroom research, including the enhancement of teaching ability, the involvement of students in research projects, or comparable activity. <b>Lowest Priority.</b>	

**Other Funding Sources:** Please advise if you have solicited or plan to seek funding from any other College or SUNY source to support this activity. \_\_\_\_\_

<b>Does this project involve:</b> <b>Humans as research subjects?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No IRB approval date: _____ Pending	<b>Does this project involve:</b> <b>Vertebrate animals as research subjects?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No IACUC approval date: _____ Pending
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**Endorsement Signatures:** Department Chair(s) \_\_\_\_\_

Dean(s) \_\_\_\_\_

## 2019-20 Faculty Development Grant Budget Page

- Please identify grant expenditures only on this page. Personal expenses associated with the project (if any) may be addressed in your budget narrative.
- Use rounded numbers only please.
- If printing, please print legibly.

3rd PARTY PERSONNEL (INDEPENDENT CONTRACTOR/CONSULTANT COSTS).

Subtotal:

SUPPLIES

Subtotal:

TRAVEL

Subtotal:

OTHER

Subtotal:

Total Funding Request:

*Check here* if a budget narrative has been provided. (Optional and limited to a single page).