## Queen's University

# University Research Grant Program for Faculty Members and Professional Librarians Application Form

Please refer to the application guidelines and Revenue Canada Agency Income Tax Folio S1-F2-C3.

All applications must be approved by Department Head, Faculty Dean and University Research Services. This application is for: Non-Sabbatical University Research Grant

Sabbatical University Research Grant

# I. PERSONAL INFORMATION

Name	Employee No.	Rank
Department	Faculty	E-mail & Tel No.

Signature

Date

# II. PROPOSED RESEARCH

Title of Project:

Location(s) of Research:

Period of Grant: \_\_\_\_\_ Date Starting: \_\_\_\_\_ Date Ending: \_\_\_\_\_

### III. PROPOSED BUDGET

Human Resources	Research Assistants	
	Clerical Assistants	
	Others (Please Specify)	
Travel	Accommodation	
	Travel	
Equipment		
Supplies & Materials		
Others (please specify)		

#### TOTAL REQUESTED:

A detailed justification of the individual elements of this budget in relation to the proposed research program must be given on one appended page. Include, if known, names of personnel, period of employment, and payment rate. Add details of travel, equipment, supplies and materials, and any other research expenditures.

#### IV. CERTIFICATION OF DEPARTMENT AND DEAN OF FACULTY:

I have reviewed this proposal, and I am satisfied that:

- a) the University will benefit from this research activity;
- b) the activity is timely and appropriate for the field of interest of the researcher;
- c) the amounts requested in the budget appear reasonable and justifiable, and
- d) amount does not exceed 40% of salary for non-sabbaticant or not exceed 80% of salary for sabbaticant

I recommend that this grant application be approved

Signature of Department Head	Department	Date
Signature of Dean	Faculty	 Date

# V. CERTIFICATION OF DIRECTOR OF UNIVERSITY RESEARCH SERVICES:

This application has been reviewed and approved by the Director of University Research Services.

_ Director o(	University Research	Services Signature
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Date