**Carroll Faculty Research Fund**

# APPLICATION: COVER SHEET

APPLICANT(S) NAME(S):

DEPARTMENT(S) /PROGRAM(S)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACADEMIC RANK(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E MAIL(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT TITLE:

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| --- |
| CURRENT EXTERNAL OR INTERNAL (including sabbatical) RESEARCH SUPPORT (NOTE THE PRECISE START AND END DATES FOR CURRENT RESEARCH): |
| PREVIOUS 5 YEARS INTERNAL RESEARCH SUPPORT (INCLUDE DATES AND AMOUNTS): |
| OTHER CONCURRENT OR PENDING APPLICATIONS? Yes No |
| If yes, please specify source (select all that apply): UMBC START UMBC SFF UMBC CIRCA/CAHSS SFRF DRESHER/CAHSS SFRF IRC/CAHSS SFRF MIPAR/CAHSS SFRF CAHSS Research Fellowship CAHSS Pedagogy & Teaching Award |
| Other: |

***I/ We have read and accept the conditions of the Carroll Research Fund:***

APPLICANT(S)’ SIGNATURE(S): DATE

CHAIR(S)’ SIGNATURE(S): DATE