



Name: _____

Date: _____

Faculty or Graduate Student: _____

Email Address: _____

Position Title: _____

Phone Number: _____

FTE Appointment: _____

College / Department Information

College: _____

Department Business Manager Name: _____

Department Name: _____

UA Mailing Address: _____

Department Business Manager Email: _____

Proposal Information

Proposal Title: _____

Requested Amount: _____

Time Period for Proposed Activities: _____

Responsibility and Eligibility

Compliance/Research Risk Acceptance of Responsibility:

I acknowledge that if my project includes research risk item(s), I and my department are responsible for maintaining compliance in conjunction with institutional policies. Please indicate acceptance of the University's Conflict of Interest Policy:

____ Yes ____ No

Eligibility:

I certify that I am an eligible applicant and I have prepared my budget in conjunction with my department business office:

____ Yes ____ No

Documents

Please add the documents listed below, in the order specified, and save everything as **a single PDF file** submit to the Director, Javier Duran (duran@email.arizona.edu) and CC Program Coordinator, Sr., Yadira Caballero (yadirac@email.arizona.edu).

1. Cover Sheet (above)
2. Project Description (500 Words maximum, double-spaced, 12 Pt. font)
3. Detailed Budget
4. Budget Justification
5. Letter of Commitment from Unit Head