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**Untenured Faculty Research Initiative (UFRI)**

**RENEWAL APPLICATION for 2020-2021 Academic Year**

1. **APPLICANT INFORMATION**

Name:

Department:

Years at Kean:

1. **RENEWAL STATEMENT**

Title of your funded UFRI project:

Year of initial award:

Summarize your original proposed objectives. MAXIMUM ONE PAGE

Describe in detail your progress to date toward these objectives. MAXIMUM TWO PAGES

List in detail all publications/presentations/exhibits/performances, etc. as applicable that have resulted from your UFRI award to date

Provide a justification for why your UFRI award should be renewed an additional year

Have you submitted the required reports from the initial award to ORSP?

YES NO

1. **PROPOSAL INFO**

**Proposal Title (100 characters)**

**Proposal Abstract -** MAXIMUM ONE PAGE

(*Must include a concise statement of the proposal goal; importance and significance of project; and broader impacts and/or benefits to Kean University)*

Total Days/Credits Requested Fall Semester Spring Semester Type

1. **PROPOSAL DESCRIPTION**

**Objectives and Outcomes -** MAXIMUM TWO PAGES

*(Clearly state the objectives, activities and expected outcomes for this project)*

**Procedures and Methods**

*(Describe in detail the procedures and methods you will use)*

**Timeline**

*(Discuss how you will complete your project within the grant period and how it fits within the larger context of your research)*

**Qualifications/Publications** - MAXIMUM of 5 most closely related to the proposed project

(*Discuss your qualifications for carrying out this project. Please list your publications, exhibitions, presentations, etc. which are most closely related to proposed project*)

**Is this proposal related to another pending proposal?**

**\_\_\_\_\_**Yes \_\_\_\_\_No

**If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **PROPOSAL BUDGET**

If direct cost is needed, fill in the budget shown below. ***Please note that the budget total cannot exceed $400***

|  |  |
| --- | --- |
| Printing/Office Supplies |  |
| Educational Supplies |  |
| Travel |  |
| Professional Services |  |
| Student Stipends |  |
| **TOTAL (cannot exceed $400)** |  |

**Budget Justification**

(*Explain how the requested items will be used in the execution of this project*)

1. **HUMAN SUBJECTS**

Does this project involve the use of human subjects? YES NO

If yes, provide the date you submitted or plan to submit your study protocol for IRB review

Date:

1. **ADDITIONAL INFORMATION**

Will you provide any additional documents to be shared with, and reviewed by the Committee?   
(*If yes, please note that it is the applicant’s responsibility to deliver the additional materials to ORSP one week prior to the meeting date*).

Yes No

1. **STATEMENT**

*If awarded support through the Untenured Faculty Research Initiative, I understand that an interim report is due by December 15 of the award year and a final report is due by June 15 of the following year.*

Print Name Date