



**REQUIRED COVER PAGE**

**TEACHING TECHNOLOGY INNOVATION GRANT  
APPLICATION**

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

**Name of Project Director:** \_\_\_\_\_

**College (abbrev):** \_\_\_\_\_ **Department:** \_\_\_\_\_

**(as applicable) Name of Co-Project Director:** \_\_\_\_\_

**College (abbrev):** \_\_\_\_\_ **Department:** \_\_\_\_\_

**Amount Requested: \$** \_\_\_\_\_

**Are human subjects involved in this research?** \_\_\_\_\_

If Yes, IRB approval will be required before the research may be initiated.

**SIGNATURES**

\_\_\_\_\_  
**Project Director** **Date**

\_\_\_\_\_  
**Co-Project Director (as applicable)** **Date**

\_\_\_\_\_  
**Department Head** **Date**

\_\_\_\_\_  
**Dean** **Date**

**PROPOSED BUDGET**  
(include budget categories as appropriate)

1. Faculty (gross salary plus fringe benefits, 1/8 of annual salary for each course release). \$ \_\_\_\_\_
  
2. Graduate Assistant or Undergraduate Student non-work study stipend (Student labor should be well defined in the proposal and match the total listed here.) \$ \_\_\_\_\_
  
3. \*Supplies and software (please list items to be purchased and estimated price per item including taxes and shipping, if appropriate):  
  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  

(add lines as needed)

Total estimated supplies \$ \_\_\_\_\_
  
4. Travel (please list travel expenditures by date and estimated costs):  
  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  

(additional lines as needed)

Total estimated travel \$ \_\_\_\_\_
  
5. \*Capital Outlay (list items to be purchased and estimated price per item including taxes and shipping, if appropriate):  
  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  

(add lines as needed)

Total estimated capital outlay \$ \_\_\_\_\_
  
- TOTAL PROPOSED BUDGET \$ \_\_\_\_\_

\*Items purchased under \$5,000 (including taxes and shipping) are considered supply items. Capital Outlay items are those which cost \$5,000 (per item) or more (including taxes and shipping).