2018-19 Vilas Life Cycle Professorship Application

Women in Science & Engineering Leadership Institute (WISELI)/The Office of the Provost

3065 Mechanical Engineering Building, 1513 University Avenue, Madison, WI 53706

|  |
| --- |
| Project Title |
| Proposed Start Date | Proposed End Date |
| Principal Investigator |
| Name | Rank | College/School and Department | UDDS |
| Email | Phone | Address (room, building, street) |

|  |
| --- |
| PI's Department Grants Administrator |
| Name | Email & Phone | Address (building, room, street) |

**Statements Regarding Use of Human Subjects, Animals, and Biological Materials**

**Note: Projects require appropriate committee review before funds will be allocated.**

Does the proposed research **involve human subjects**? Yes  No

If yes, has the project previously been reviewed and approved by your Institutional Review Board? Yes  No

If yes, indicate date of approval: Month Year

Does the proposed research **involve animals**? Yes  No

If yes, has the project previously been reviewed and approved by the Research Animal Resources Center? Yes  No

If yes, indicate date of approval: Month Year

Does the proposed research **involve the use of potentially hazardous biological materials**? Yes  No

If yes, has the project previously been reviewed and approved by the Biological Safety Committee? Yes  No

If yes, indicate date of approval: Month Year

By signing below, I agree that the information provided in this application for a Vilas Life Cycle Professorship is accurate.

Section A. Worksheet/Justification

1. Academic Staff or Faculty\*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title & Name (if known) | 2018-19$ Salary | Period MM/YY thru MM/YY | % Time Requested | $ Salary Requested |
|  |  |  | 50% 33%25% \_\_\_Other % |  |
|  |  |  | 50% 33%25% \_\_\_Other % |  |
| \*If requesting salary for the faculty/PI, please read the FAQs and/or contact jennifer.sheridan@wisc.edu for instructions. | Total $ |  |

2. Research Assistants

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (if known) | Annual orAcademic | PeriodMM/YY thru MM/YY | No. of Months | % Time Requested | $ Salary Requested |
|  | AnnualAcademic yr. |  |  | 50% 33%25% \_\_\_Other % |  |
|  | AnnualAcademic yr. |  |  | 50% 33%25% \_\_\_Other % |  |
|  |  |  |  | Total $ |  |

3. Project Assistants.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name (if known) | PeriodMM/YY thru MM/YY | No. of Months | % Time Requested | $ Salary Requested |
|  |  |  | 50% 33%25% \_\_\_Other % |  |
|  |  |  | 50% 33%25% \_\_\_Other % |  |
|  |  |  | Total $ |  |

4. Research Associates.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name (if known) | 2018-19$ Salary | Period MM/YY thru MM/YY | % Time Requested | $ Salary Requested |
|  |  |  | 50% 33%25% \_\_\_Other % |  |
|  |  |  | Total $ |  |

5. LTE Hourly Help Total $

6. Student Hourly Help Total $

7. Project Travel. (Justify travel required for the project.) Total $

8. Supplies, Expenses, and Computing Time. Total $

 (Detailed list of items and cost for each item)

9. Capital Equipment. List each item over $5,000, proposed use, value, and amount requested.

|  |  |  |  |
| --- | --- | --- | --- |
| Item description | Proposed Use/Justification | Value | $ Amount Requested |
|  |  |  |  |
|  |  |  |  |
|  |  | Total $ |  |

Section B. Budget Summary

|  |  |  |
| --- | --- | --- |
|  | Vilas Funding | Other Funding(Note source of funds; e.g., department, Graduate School, startup, etc.) |
| 1. Academic Staff Salary |  |  |
| 2. Research Assistant Salary  |  |  |
| 3. Project Assistant Salary  |  |  |
| 4. Research Associate Salary |  |  |
| 5. LTE Hourly Help |  |  |
| 6. Student Hourly Help |  |  |
| 7. Project Travel |  |  |
| 8. Supplies, Equipment, Computing Time |  |  |
| 9. Capital Equipment |  |  |
| 10. Fringe Benefits (Rates: http://www.rsp.wisc.edu/rates/index.html) |  |  |
| 11. Tuition Remission ($6,000/semester) |  |  |
| 12. Total Amount |  |  |

|  |
| --- |
| **Current and Pending Support (please include startup, if applicable)** |
| Online tool available here:<https://www.rsp.wisc.edu/currentPending/>  |
|  |
| **Support:** | **[ ]  Current**  | **[ ]  Pending**  | **[ ]  Submission Planned in Near Future**  | **[ ]  \*Transfer of Support**  |
|  |  |  |  |  |  |  |  |
| Project/Proposal Title: |
|  |
|   |
|  |
|   |
| Source of Support:   |
|  |
| Total Award Amount: $  | Total Award Period Covered:  |
|  |
| Location of Project:   |
|  |
| Person-Months Per Year Committed to the Project. |   | Cal:   | Acad:  | Sumr:  |
|  |
| **Support:** | **[ ]  Current**  | **[ ]  Pending**  | **[ ]  Submission Planned in Near Future**  | **[ ]  \*Transfer of Support**  |
|  |  |  |  |  |  |  |  |
| Project/Proposal Title: |
|  |
|   |
|  |
|   |
| Source of Support:  |
|  |
| Total Award Amount: $  | Total Award Period Covered:  |
|  |
| Location of Project:  |
|  |
| Person-Months Per Year Committed to the Project. |   | Cal:  | Acad:  | Sumr:  |
| **Support:** | **[ ]  Current**  | **[ ]  Pending**  | **[ ]  Submission Planned in Near Future**  | **[ ]  \*Transfer of Support**  |
|  |  |  |  |  |  |  |  |
| Project/Proposal Title: |
|  |
|   |
|  |
|   |
| Source of Support:  |
|  |
| Total Award Amount: $  | Total Award Period Covered:  |
|  |
| Location of Project:  |
|  |
| Person-Months Per Year Committed to the Project. |   | Cal:  | Acad:  | Sumr:  |
| **Support:** | **[ ]  Current**  | **[ ]  Pending**  | **[ ]  Submission Planned in Near Future**  | **[ ]  \*Transfer of Support**  |
|  |  |  |  |  |  |  |  |
| Project/Proposal Title: |
|  |
|   |
|  |
|   |
| Source of Support:  |
|  |
| Total Award Amount: $  | Total Award Period Covered:  |
|  |
| Location of Project:  |
|  |
| Person-Months Per Year Committed to the Project. |   | Cal:  | Acad:  | Sumr:  |
| **Support:** | **[ ]  Current**  | **[ ]  Pending**  | **[ ]  Submission Planned in Near Future**  | **[ ]  \*Transfer of Support**  |
|  |  |  |  |  |  |  |  |
| Project/Proposal Title: |
|  |
|   |
|  |
|   |
| Source of Support:  |
|  |
| Total Award Amount: $  | Total Award Period Covered:  |
|  |
| Location of Project:  |
|  |
| Person-Months Per Year Committed to the Project. |   | Cal:  | Acad:  | Sumr:  |
|  |  |  |  |  | USE ADDITIONAL SHEETS AS NECESSARY |

**Budget Justification**

In one page or less, please describe how the requested funds fit into your research plans. *Please include an explanation for how the requested Vilas funding fits into any other funding you may have, including remaining startup funds, if applicable.*