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

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| --- | --- | --- | --- |
| 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](mailto:jennifer.sheridan@wisc.edu) for instructions. | | | Total $ |  |

2. Research Assistants

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (if known) | Annual or  Academic | Period  MM/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) | Period  MM/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.

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

Section B. Budget Summary

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| --- | --- | --- |
|  | 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 |  |  |

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