

**Cover Page**

**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.

Principal Investigator's Signature	Date	WISELI Use	
		WISELI Log No.	Date Received

## 2018-2019 Vilas Life Cycle Professorship Budget Form

### 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
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$				

\*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.

#### 2. Research Assistants

Name (if known)	Annual or Academic	Period MM/YY thru MM/YY	No. of Months	% Time Requested	\$ Salary Requested
	<input type="checkbox"/> Annual <input type="checkbox"/> Academic yr.			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
	<input type="checkbox"/> Annual <input type="checkbox"/> Academic yr.			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$					

#### 3. Project Assistants.

Name (if known)	Period MM/YY thru MM/YY	No. of Months	% Time Requested	\$ Salary Requested
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$				

#### 4. Research Associates.

Name (if known)	2018-19 \$ Salary	Period MM/YY thru MM/YY	% Time Requested	\$ Salary Requested
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$				

5. LTE Hourly Help Total \$ \_\_\_\_\_

6. Student Hourly Help Total \$ \_\_\_\_\_

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

## 2018-2019 Vilas Life Cycle Professorship Budget Form

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.

<u>Item description</u>	<u>Proposed Use/Justification</u>	<u>Value</u>	<u>\$ Amount Requested</u>
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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: <a href="http://www.rsp.wisc.edu/rates/index.html">http://www.rsp.wisc.edu/rates/index.html</a> )		
11. Tuition Remission (\$6,000/semester)		
12. Total Amount		



## **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.*