



## Application form for research support

### 1. APPLICANT INFORMATION:

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### 2. RESEARCH PROJECT INFORMATION:

Details about the proposed research project:

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Anticipated outcomes of the research project (including publication(s)):

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How the research project will benefit the USMC/RSM community:

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### 3. COSTS:

Travel (actual transportation plus subsistence): \_\_\_\_\_

Student research assistance: \_\_\_\_\_

Printing/Scanning costs: \_\_\_\_\_

Total: \_\_\_\_\_

Budget Narrative:

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**4. PREVIOUS AWARDS:** Please list 3 most recent awards from SSHRC or other USMC/RSM sources

Date: \_\_\_\_\_ Name of award: \_\_\_\_\_ Amount of award: \_\_\_\_\_  
Date: \_\_\_\_\_ Name of award: \_\_\_\_\_ Amount of award: \_\_\_\_\_  
Date: \_\_\_\_\_ Name of award: \_\_\_\_\_ Amount of award: \_\_\_\_\_

Signature of the Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**5. APPROVAL OF PRINCIPAL, DEAN, DIRECTOR OR CHIEF LIBRARIAN:**

I certify that this application has my support.

\_\_\_\_\_  
Name Signature

Date: \_\_\_\_\_

PLEASE SUBMIT AN ELECTRIC COPY OF COMPLETED FORM PLUS CV IN AN APPROVED FORMAT TO THE USMC RESEARCH ADMINISTRATION COMMITTEE