

**NTID Student Research
Microgrant Application Form**

Student Name: _____ Date: _____

Student Email: _____

Student UID: _____

Student Department: _____

Program/Major: _____

Expected Date of Graduation: _____ GPA: _____

Faculty Research Mentor Name: _____

Faculty Research Mentor Email: _____

Faculty Research Mentor's Staff Assistant Name: _____

Faculty Research Mentor's Staff Assistant Email: _____

Dollar Amount of Funds Requested (up to \$1,000) _____

Project Title: _____

Project Timeline: Start Date: _____ Completion Date: _____

Description of research project (one-page limit): Below, please write a brief description of your research project and explain how the microgrant will be used. Include your goals and what you hope to learn from this project. This section must be written by the student, but approved by the faculty mentor.

Budget

Item	Qty	Justification/Use	Total Cost	Additional Funding (indicate source, if applicable.)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
Grand Total:				

Please include active URL web links below for your Budget items in the table above. If your microgrant is approved, this will help with purchasing the listed items. Make sure that the link is accurate and the items are currently available for purchase (and in stock):

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

Acknowledgment of Requirements

- ☐ I am an NTID-supported student with a GPA of 3.0 or above.
- ☐ I will not graduate before the project completion date listed above.
- ☐ I am in good academic, financial, and judicial standing at RIT/NTID.
- ☐ My proposed research work must be completed in collaboration with a faculty mentor.
- ☐ I understand that if I am conducting research under externally-funded projects, I will use those funds before applying for the NTID-funded grant opportunities.
- ☐ Projects that involve human subjects require [RIT Institutional Review Board \(IRB\) approval](#).
- ☐ The application form has been completed by me (the student researcher) and approved by my faculty mentor.
- ☐ With the approval of my faculty mentor, I am required to present at NTID's Annual Student Research Fair (typically in April).
- ☐ The maximum amount requested is \$1,000.
- ☐ Funds are to be used to purchase equipment or supplies and are not to be used for pay, stipends, or travel.
- ☐ Any supplies/equipment purchased with these funds are property of RIT/NTID and will remain with RIT/NTID after the completion of the research project.
- ☐ The microgrant funds must be managed by the faculty mentor--in collaboration with the mentor's department budget assistant--and must strictly follow RIT's accounting policies.
- ☐ We, the student and faculty mentor, agree that all funds will be used and receipts/invoices turned in to the department budget assistant within one (1) month of making purchases. *Exception - All invoices in September and June are due by the 15th to adhere to budget cycle closing.*

Student Signature: _____ Date: _____

Faculty Research Mentor Signature: _____ Date: _____

I have reviewed and support this project description and projected budget. I am able to support this student and project.

**Submit application form via email to: Dr. Todd Pagano,
NTID Professional and Student Scholar Development,
at tepnts@rit.edu**