**THE UNDERGRADUATE STUDENT RESEARCH EXPENSE FUND**

**Goal**
To provide funding for undergraduate students to pursue a broad scope of research and creative projects.

**Objective**
The Undergraduate Student Research Expense Fund at Indiana University East is an important source of funding for student research. Students may apply for grants to attend scholarly conferences and workshops, or to assist with various expenses associated with research or creative activities. These funds may be used to purchase equipment, assist with travel to a research location, or to defray the incidental costs of research (photocopying, etc.) if the student’s academic school does not have funds available.

**Guidelines**
The student may apply submit a grant proposal to the Office of Academic Affairs (WZ101) at any point in the academic year. Proposals are reviewed at the beginning of each month by Associate Vice Chancellor for Academic Affairs and the Special Advisor to the Chancellor. Due to limited availability of funds, no student may receive more than $1200 in a single year.

**Procedures**
Students are required to submit a coversheet and brief grant proposal which details the student’s research and the nature of the request (conference registration, equipment purchase, etc.). This should be accompanied by an itemized budget summary. Students typically will be pre-approved for funds up to a specified amount, and then will be reimbursed for these expenses with the return of receipts to the Office of Academic Affairs.

Proposals for projects or presentations that involve research with humans or animals must include a signed statement by the student’s faculty advisor that all approvals from the Institutional Review Board or Institutional Animal Care and Use Committee, respectively, have been obtained.
Date: ________________________________

Student’s Name: ________________________________

Student’s Phone: ________________________________

Student’s Email: ________________________________

Student’s Major: ________________________________

Faculty Advisor for Project: Name: ________________________________

Approval Signature: ________________________________

Faculty Phone: ________________________________

Summary of Request: _______________________________________________________
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___________________________________________________________________________

Associate Vice Chancellor:

Approved _______  Disapproved _______  Date______________________________

Reason for Disapproval _____________________________________________________________________________________
___________________________________________________________________________

Executive Vice Chancellor for Academic Affairs:

Amount Approved ________________________________

Date ________________________________