

Application Instructions

Office of Undergraduate Research and Creative Activities (URCA) Major Academic Year Support (MAYS) Grant Application

Application must be submitted through Qualtrics. Please be sure to click the "Submit" button on the last page.

The following steps are required to successfully submit your grant proposal for review:

- Please use ONLY CofC email addresses and ensure you have entered the CORRECT CofC faculty email addresses in order to complete the application process.
- Digital signatures are required for all participants. Please read the URCA Guidelines prior to signing. Please <u>ONLY</u> <u>check "yes" for your specific role</u> (i.e., Student, Faculty, Chair, etc.). Leave blank for all other participants. If this is done correctly, one at a time, your

Faculty Mentor(s) and Department Chair(s) will receive an email inviting them to review and sign the application.

 You will receive an email that your application has been submitted.

If you experience any challenges uploading documents to Qualtrics, you may use SecureShare to securely share files with urca@cofc.edu. You may also email urca@cofc.edu with any questions or concerns.

Student Applicant Information

Enter the student applicant name [First and Last]:	

Enter the student applicant email address with no spaces before or after the text.

Please confirm your student applicant email address.
Enter the student applicant CofC ID Number:
Enter the student applicant CofC ID Number:
Enter the student applicant primary major:
Current enrollment status of student applicant: Full-time (12 hours or more) Part-time (less than 12 hours)

Qualtrics Survey Software

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Graduation year of student ap	oplicant:
Please select (if applicable):	
☐ Minority	
First-Generation Student	
How did you hear about this p	particular grant opportunity?
Yammer	Chair/Dean
Facebook	Professor
Instagram	URCA Website
Twitter	Cofc Calendar
Email	Other, please specify

Upload transcripts

Campus Flyer/Digital Advertisement

Upload additional transcripts (if needed)

Upload Course Schedule

Upload IRB/IACUC Approval, if applicable

Mentor Information

Enter the primary faculty mentor applicant's name [First and Last]:

Enter the primary faculty mentor email with no spaces before or after the text. It is essential to enter the correct faculty email address in order to complete the application process.
Please confirm the primary faculty mentor email address.
Enter the primary mentor's department (no abbreviations please):

Qualtrics Survey Software

Primary mentor's faculty status:

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O Tenured/Tenure-Tro	ack
O Instructor	
O Visiting	
O Adjunct	
	Other, please specify:
	ter the secondary faculty mentor email with re or after the text. If this does not apply to re blank.
Enter the name Chair [First and	of the primary faculty mentor's Department Last]:

Enter the Department Chair's email with no spaces before or after the text.

5/25, 9:10 PM	Qualtrics Survey Software
Please con	firm the Department Chair's email with no
spaces be	fore or after the text.
If applicab	le, enter the secondary Department Chair's emai
• •	aces before or after the text. If this does not
apply to yo	ou, please leave blank.
Project Inf	formation
rioject iiii	officialis
PROPOSAL	TITLE:

Please provide the following project information:

	Yes	No
Does the proposal involve research on human subjects?	\bigcirc	0
Does the proposal involve research with live vertebrate animal subjects?	\bigcirc	\bigcirc
Is there another internal or external proposal current or pending for this research/creative work?	\bigcirc	0
Does the project have potential for copyright or invention?	\bigcirc	0
Does the project involve biohazards or other safety issues?	\bigcirc	\bigcirc
Does the project involve international travel?	\bigcirc	\bigcirc

For international travel, please confirm the Travel Advisory Level per the U.S. Department of State (see https://travel.state.gov/content/travel/en/traveladvisories/tr

- O Level 1 Exercise Normal Precautions
- Level 2 Exercise Increased Caution
- O Level 3 Reconsider Travel
- O Level 4 Do Not Travel

For proposed international travel to countries categorized by the U.S. Department of State as Level 3 or above, you must consult with the Associate Provost for Academic & International Programs at delmastromp@cofc.edu. Please upload a signed letter of support from the Dean of your Faculty Mentor's School confirming that you have received approval from the Provost's Office to travel.

Please share any URCA support that the student or faculty has received for this or any other project currently or in the past 12 months. Please indicate any other proposals from the student or faculty under consideration by URCA during the currently cycle. If none, please write "None."

Student Statement of Intent (500 word limit):

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		_//
	al Statement of Intent (250 word limit). ONLY IF (see application guidelines).	
Non-Tec	chnical Project Abstract (250 word limit):	
		_//

Project Description (1500 word limit, not including References). The Project Description is expected to contain

all required elements to be competitive for funding (see application guidelines).
If your Project Description requires charts, graphs, or other special figures, you may upload a PDF of your Project Description here. You must still adhere to the 1500 word limit. Please write "See PDF" in the field above.
References. Please use this space to provide any references or works cited in the Project Description.

Proposed Research or Creative Experience Narrative ((1000
word limit). The Narrative is expected to contain all re	quired
elements to be competitive for funding (see applicati	on
guidelines).	

Proposed Budget Table. *No travel will be awarded for the dissemination of project results.

	MAYS Funding Requested	Dept/School/Other Internal Support for Project	External Support for Project	Total Cost of Proposed Projec
A. Student Travel*				
B. Faculty Travel*				
C. Supplies & Materials				
D. Other				

	MAYS Funding Requested	Dept/School/Other Internal Support for Project	External Support for Project	Total Cost of Proposed Proje
E. Total				
Costs				
Per				
Column				

Signatures

Digital signatures are required for all participants. Please read the URCA Guidelines prior to signing.

Please ONLY check "yes" for your specific role (i.e., Student, Faculty, Chair, etc.). Leave blank for all other participants.

As the **Student,** I am aware of and intend to follow appropriate Program, Departmental, School, College and State rules and regulation for conducting projects, travel, and expenditure of funds.

O Y	es
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O No

Student Applicant sign here.



IMPORTANT: If you are a Student, leave this question

blank. ONLY check "yes" for your specific role (i.e., Student, Faculty, Chair, etc.). Leave blank for all other participants.

As the **Faculty Mentor**, I am aware of and intend to follow appropriate Program, Departmental, School, College and State rules and regulation for conducting projects, travel, and expenditure of funds.

Yes

Primary Faculty Mentor sign here.

	SIGN	HERE	
×			
			clear

<u>IMPORTANT: If you are a Student, leave this question</u> <u>blank.</u> ONLY check "yes" for your specific role (i.e., Student,

Faculty, Chair, etc.). Leave blank for all other participants.

As the **Department Chair**, I acknowledge that this student and faculty mentor are applying for an URCA Grant and that the funds for successful proposals will be transferred into the departmental account for disbursement based on the budget included in this proposal.

□ Ye	S
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□ No

Department Chair sign here.

SIGN HERE

× clear

Secondary Faculty

As the Secondary Faculty Mentor, I am aware of and intend to follow appropriate Program, Departmental, School, College and State rules and regulation for conducting projects, travel, and expenditure of funds.

∟ Yes

__ No

Secondary Faculty Mentor sign here.



As the Secondary Department Chair, I acknowledge that this student and faculty mentor are applying for an URCA Grant and that the funds for successful proposals will be transferred into the departmental account for disbursement based on the budget included in this proposal.

Yes
No

Secondary Department Chair sign here.



Instructions

Congratulations, you are almost ready to submit your preliminary grant application. Please ensure you have entered the CORRECT CofC faculty email addresses in

order to complete the application process.

Be sure to scroll to the bottom and click the "Submit button," then save the PDF on the next page for your records.

What happens now?

The following steps are required to successfully submit your grant proposal for review:

- Please use ONLY CofC email addresses and ensure you have entered the CORRECT CofC faculty email addresses in order to complete the application process.
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