

The Elaine Bjorklund Faculty Research Awards Fund in Social Science

Application Form

Date:				Departr	ment:					
Name:				E-mail:	iiciic.					
Telephone:				E man.						
rerepriorie.										
Title of Project:						Amount requested:	\$			
Appointment:	☐ Full Professor	☐ Asse	ociate Professo	r 🗆 Ass	istant	Professor	☐ Other _			
Appointment:										
Degree		Year				Discipline				
Bachelors						•				
Masters										
Doctorate										
Current Research Projects and Research Support:										
Surname and initial(s) of principal investigator and co-investigators	Project title		Project period: Research – start and end date	Funding ager internal fund program		Type of support requested (i.e. research, strategic, equipment, etc.):	Funds requested and funds received	Status (i.e. complete, ongoing).		

Budget outline and justification:

	Additional Details	Amount
Salaries and Benefits (ie. Technician, Postdoc Fellow, Grad Student)		
Materials and supplies:		
Travel: (in accordance with Western Policies)		
Dissemination: (publication costs,		
workshops, etc.)		
Equipment:		
Equipment and computing needs are eligible for support only if critical to the research goals and		
the need is clearly documented. Equipment		
purchased with SERB funds remains the property		
of the University as per Western's policy with		
respect to ownership and disposition of		
equipment.		
Other Expenses (specify):		
Total Amount Requested:		
The maximum allowable request is \$1,500.		

Please provide a 500 word maximum (11 pt Times New Roman) justification of your budget. (insert justification here)

Describe your project (up to 500 words), and state clearly how the funds would advance it. If applicable, explain in brief how your project differs from others currently funded.

Project Title:

Description: (insert description here)

Signature of Applicant:	Signature of Departmental Chair	
Date:	Date:	