APPLICATION

SUPPORT AND

DEVELOPMENT AWARD

2018-2019

Name of proposal applicant(s)		
Faculty rank	_ Department affiliation	
Title of proposed project		
Abstract of the proposed project:		
Dates of proposed project period: From	Through	
Amount requested from A&S Support and Developn	nent Awards	
Contributions for this project from other sources (de	ept., university, outside grants, etc.):	
The undersigned agrees to accept responsibility for t provided and the filing of a final project report with	the conduct of the project, the expenditure of the funds the college office.	

I.	In the space provided below, please provide a brief description of this project.
II.	In the space provided below, please describe the rationale for conducting this project. (See items A-F on the Request for Proposals)

Ill.	Describe the methods that will be utilized in the process of conducting and completing the proposed project.
	projecti
IV.	Please describe the benefits that will be derived from this project: benefits to the university, the college, your department, your field, and/or you.

V. Please describe your ability to conduct and complete this project.

(Please limit your comments to those items that specifically pertain to this project)

PROPOSED BUDGET

SUPPORT AND DEVELOPMENT AWARD

Name		
Project Title		
TRAVEL EXPE	NSES	
Amount	Items	
TOTAL:		
SEMINAR/ WORKSHOPS		
Amount	Items	
TOTAL:		

RESEARCH SUPPLIES, EQUIPMENT OR SOFTWARE PURCHASES

TOTAL: TOTAL: TOTAL: TOTAL: TOTAL:	
GUESTS FOR SEMINARS/COLLOQUIA OR EXHIBITS Amount Items	
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ARTISTIC PRODUCTION, PAGE OR PUBLICATION CHARGES	
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Amount Items	
TOTAL:	

OTHER

Amount	Items	
TOTAL:		
Total needed for project:		
OTHER FUNDING EXPECTED: AMOUNT:		
SOURCE:		
FUNDING REQUESTED FROM ASSDA:		
The SDA proposal and the applicant's two-page summary vita should be submitted to Dr. Harry Miller at hsmiller@southalabama.edu with a cc to Krista Foley at kfoley@southalabama.edu. NOTE: Each proposal must be submitted as a PDF file. Hard copies will not be accepted for review. If you have not received an emailed receipt for your proposal within 48 hours, please email Harry Miller for confirmation.		
Signatures		
Proposal Applicant		
Department Chairperson		