

Cover Page

2017-18 Vilas Life Cycle Professorship Application
 Women in Science & Engineering Leadership Institute (WISELI)/The Office of the Provost
 3065 Mechanical Engineering Building, 1513 University Avenue, Madison, WI 53706

Project Title			
Proposed Start Date		Proposed End Date	
Principal Investigator			
Name	Rank	College/School and Department	UDDS
Email	Phone	Address (room, building, street)	

PI's Department Grants Administrator		
Name	Email & Phone	Address (building, room, street)

Statements Regarding Use of Human Subjects, Animals, and Biological Materials
Note: Projects require appropriate committee review before funds will be allocated.

Does the proposed research **involve human subjects**? Yes No
 If yes, has the project previously been reviewed and approved by your Institutional Review Board? Yes No
 If yes, indicate date of approval: Month _____ Year _____

Does the proposed research **involve animals**? Yes No
 If yes, has the project previously been reviewed and approved by the Research Animal Resources Center? Yes No
 If yes, indicate date of approval: Month _____ Year _____

Does the proposed research **involve the use of potentially hazardous biological materials**? Yes No
 If yes, has the project previously been reviewed and approved by the Biological Safety Committee? Yes No
 If yes, indicate date of approval: Month _____ Year _____

By signing below, I agree that the information provided in this application for a Vilas Life Cycle Professorship is accurate.

Principal Investigator's Signature	Date	WISELI Use	
		WISELI Log No.	Date Received

2017-2018 Vilas Life Cycle Professorship Budget Form

Section A. Worksheet/Justification

1. Academic Staff.

Title & Name (if known)	2017-18 \$ Salary	Period MM/YY thru MM/YY	% Time Requested	\$ Salary Requested
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$				

2. Research Assistants

Name (if known)	Annual or Academic	Period MM/YY thru MM/YY	No. of Months	% Time Requested	\$ Salary Requested
	<input type="checkbox"/> Annual <input type="checkbox"/> Academic yr.			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
	<input type="checkbox"/> Annual <input type="checkbox"/> Academic yr.			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$					

3. Project Assistants.

Name (if known)	Period MM/YY thru MM/YY	No. of Months	% Time Requested	\$ Salary Requested
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$				

4. Research Associates.

Name (if known)	2017-18 \$ Salary	Period MM/YY thru MM/YY	% Time Requested	\$ Salary Requested
			<input type="checkbox"/> 50% <input type="checkbox"/> 33% <input type="checkbox"/> 25% <input type="checkbox"/> Other %	
Total \$				

5. LTE Hourly Help Total \$ _____

6. Student Hourly Help Total \$ _____

7. Project Travel. (Justify travel required for the project.) Total \$ _____

2017-2018 Vilas Life Cycle Professorship Budget Form

8. Supplies, Expenses, and Computing Time. Total \$ _____
 (Detailed list of items and cost for each item)

9. Capital Equipment. List each item over \$5,000, proposed use, value, and amount requested.

<u>Item description</u>	<u>Proposed Use/Justification</u>	<u>Value</u>	<u>\$ Amount Requested</u>
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Total \$ _____

Section B. Budget Summary

	Vilas Funding	Other Funding (Note source of funds; e.g., department, Graduate School, startup, etc.)
1. Academic Staff Salary		
2. Research Assistant Salary		
3. Project Assistant Salary		
4. Research Associate Salary		
5. LTE Hourly Help		
6. Student Hourly Help		
7. Project Travel		
8. Supplies, Equipment, Computing Time		
9. Capital Equipment		
10. Fringe Benefits (Rates: http://www.rsp.wisc.edu/rates/index.html)		
11. Tuition Remission (\$6,000/semester)		
12. Total Amount		

Budget Justification

In one page or less, please describe how the requested funds fit into your research plans. *Please include an explanation for how the requested Vilas funding fits into any other funding you may have, including remaining startup funds, if applicable.*