



## **Small Grant Reward Application**

### **Applicant Information**

PI Name: \_\_\_\_\_

PI Degree: \_\_\_\_\_

PI Title: \_\_\_\_\_

PI Institution: \_\_\_\_\_

PI Mailing Address: \_\_\_\_\_

PI Phone Number: \_\_\_\_\_

PI Email: \_\_\_\_\_

### **Co-Investigator or Mentor Information**

Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Name: \_\_\_\_\_

Degree: \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_



**Institution Information**

Legal name and Tax ID number: \_\_\_\_\_

Checks made payable to: \_\_\_\_\_

Administrative contact: \_\_\_\_\_

Mailing address for checks: \_\_\_\_\_

**Proposal Information**

Grant type  
(Trainee or Established Investigator): \_\_\_\_\_

Proposal Title: \_\_\_\_\_

Amount of money requested: \_\_\_\_\_

Does the study require the use of human or animal subjects:    Yes \_\_\_\_\_    No \_\_\_\_\_

If yes, do you currently have IRB approval for this study:    Yes \_\_\_\_\_    No \_\_\_\_\_

**If you have questions, please contact:**

**Allison Ashley-Koch, Ph.D., Chair  
CSF Grant Review Committee  
allison.ashleykoch@duke.edu**