**Ray and Lorna Coppinger Endowment Grants**

for student/faculty or student & faculty research projects
in the cognitive or biological sciences

**Information and Application Guidelines
for Research Projects**

**(See other application for Internships, Research Assistantships, & Field Study)**

**Application Deadline: April 28 4:30pm**

### Components of Application

1. **Cover Page: Fill out the cover sheet below and attach it to your application.**
2. **Research Proposal: Single spaced, 12-pt type, 3 pages maximum that addresses the following:**
	1. area of research and its grounding in the research literature;
	2. specific hypothesis or question to be investigated;
	3. research design and methods;
	4. anticipated outcomes of the research and its implications.
	5. how the research project is consonant with the focus and goals of the Coppinger Fund.
3. **Bibliographic list of references** cited in the proposal (1 page maximum).
4. **Brief statement of your background** and qualifications for completing the project (1 page maximum).
5. **Budget** **(must be saved in Excel format and sent separately from the rest of your application)**. The budget should list each item, its cost, shipping (if applicable), tax, and its justification, with a total. Your Hampshire faculty supervisor must review and sign off on your budget. The budget must state all sources of funding you have received or are applying for to support your research. Please see sample budget below.
6. Copy of your **approval by or application to any relevant research oversight committee**:
	1. For research involving animals, the relevant Institutional Animal Care and Use Committee (IACUC).
	2. For research involving human participants, the relevant Institutional Review Board (IRB).
	3. Laboratory/Project Workspace Use and Safety Approval certification or letter from lab manager.

Your faculty supervisor should have information about the above committees and regulations, as well as other possibly applicable regulations and committees (e.g. lab use and safety approval, Institutional Biosafety Committee (IBC), etc.).

1. **Letter of support from your faculty supervisor**. If the research is to be conducted at a lab other than or in addition to your supervisor's or at an off-campus lab or field site, you must provide a letter of support from the supervisor at the lab site where you will be working.
2. For **Division II students**, a copy of your Division I portfolio evaluation, your Division II contract, and your Division II course evaluations to date. (These documents should be printed from The Hub, not copied into another document.)
3. For **Division III students**, a copy of your Division II evaluation. If your evaluation has not been written, then include evaluations for several relevant courses, printed directly from The Hub. (These documents should be printed from The Hub, not copied into another document.)

**Ray and Lorna Coppinger Endowment Grants**

Application Cover Sheet & Checklist for Research Projects

**Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Box #** \_\_\_\_\_\_\_\_\_ **Mailing Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Div II project**  [ ]   **Div III project**  [ ]  **Hampshire Faculty Supervisor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of faculty whose lab you will work in** (If applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Affiliation** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed start date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Proposed end date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Location of Project** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approvals needed:** No, not applicable [ ]

IACUC required [ ]  IACUC letter attached [ ]  Waiting for IACUC approval [ ]

IRB required [ ]  IRB letter attached [ ]  Waiting for IRB approval [ ]

Laboratory/Project Workspace Use and Safety Approval certification required [ ]  attached [ ]

Other regulatory certification, list & status \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Checklist of Application Components:***Check each item to confirm that you have included the following in the order listed below:*

 [ ]  This Cover Sheet

 [ ]  Research Proposal

 [ ]  Bibliographic list of reference

 [ ]  Statement of background and qualifications

 [ ]  Budget (in Excel), reviewed and signed by supervisor (see template below)

 [ ]  Oversight Committee approval letter (or application if still waiting on approval)

 [ ]  Letter of support from your faculty supervisor [ ]  Requested (if not yet received)

 [ ]  For Div II students, Div I portfolio evaluation, Div II contract and Div II course evaluations to date

 [ ]  For Div III students, Div II evaluation or equivalent evaluations from the Hub

**Application Deadline: Monday March 12, 2021**

Compile all above documents into one PDF file and email it to:
kafNS@hampshire.edu

**Sample Budget**

Your budget needs to be submitted in Excel format as part of your complete application. For tax and shipping, simply indicate a $25 to $50 ballpark.

Please note whether you are requesting funding from other sources, the amount(s) and what it will cover. Also indicate if the same budget is being submitted to multiple funding sources.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ITEM** | **COST** | **DETAILS** | **VENDOR** | **JUSTIFICATION** |
| **TRAVEL** |  |  |  |  |
| Destination: Site Name, City, State, Country | $300.00 |  | United Airlines via Travelocity | Round-trip Airfare via XXX .Air travel is the most practical way to get to XYZ |
| Housing for July and August | $600 | $300/month, utilities included |  |  |
| Fuel Reimbursement for travel to XYZ2 | $165.00 | Mileage rate: $.54/mile |  | Use of personal automobile for round-tripjourney to and from non-local field site XYZ2. |
| **EQUIPMENT/SUPPLIES** |  |  |  |  |
| Glucocorticoid | $150 |  | Sigma Aldrich | To be purchased by NS |
| Automatic Feeder (3) | $90 | $30 per item | Amazon | To be purchased by NS |
| Phosphate Buffered Saline | $40.20 |  | Sigma Aldrich | To be purchased by NS |
| Book 1 (title and author) | $19.99 | Tax & shipping included | Amazon | Used to maintain cells. |
| Book 2 (title and author) | $9.85 | Tax & shipping included | Amazon |  |
| Tax on Equipment | $25 |  |  |  |
| Shipping on Equipment | $50 |  |  |  |
| **TOTAL BUDGET** | **$1450.04** |  |  |  |
| **ADDITIONAL FUNDING REQUESTED** | **$500** |  | CBD  | For living expenses in XYZ city |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |