**Committee on Research and Creative Activity  
Application Form**

*Applications should be submitted electronically as a single file to Tina Radley* [*radley@uwp.edu*](mailto:radley@uwp.edu) *and the CRCA Committee Chair, Traci Lee* [*leet@uwp.edu*](mailto:leet@uwp.edu)

**Name of Applicant:**

**Department:**

**Confirm full-time faculty status by checking box:** □

(Faculty must have less than a 50% administrative role and retain Faculty voting rights)

**Current Rank:**

**Date application was submitted to CRCA Committee:**

**Type of Request:**

**Paper has been accepted for presentation:** □

**Paper has been submitted for presentation and is under review:** □

**Not a conference presentation:** □

1. Description of project or activity.

1. **Professional benefits of the project or activity to the Applicant.**

1. **Previous grant submissions and awards related to the current application or project that have been applied for and/or received by the applicant (include funding agency, project title, year of submission/award, status of application, and amount of award if funded).**

**SUBMISSION CHECKLIST**

**(include with application)**

**Name of Applicant:**

1. CRCA Application form has been completed.
2. Confirmed full-time faculty status (Faculty must have less than a 50% administrative role and retain Faculty voting rights)
3. Required signatures have been obtained.
4. A budget has been developed using the required budget form and is included with this application.
5. For conference travel requests, documentation is included showing proof of acceptance of a paper/poster for presentation.
6. A statement of support from the Department Chair (or Dean if applicable) has been obtained and is included with this application. The statement should address the department’s policy on funding travel and research activities, as well as the department’s financial support in this case.
7. A Curriculum Vita is included with this application (abbreviated CVs preferred).
8. Supporting documentation and information is included with this application.
9. If applicable, approval for travel has been received.

**REQUIRED SIGNATURES:**

**Applicant Date**

**Department Chair Date**