



# Start-Up Research Funds

## Business Office

Submit completed form to the Business Office with original signatures.

<b>Date:</b>	<b>Faculty Candidate:</b>
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<b>Level:</b> University          COP          COM	<b>Department:</b>
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**Proposal Details:**

Requested budget per academic year:							
	Year 1	Year 2	Year 3	Total			
\$	-	\$	-	\$	-	\$	-

Proposed Budget Details Attached         
  IRB, IACU, etc. Approvals Attached

**All submitted proposals must carry the endorsement of the appropriate University officials. Only after all indicated approvals have been obtained in writing can the hiring unit convey this information to the candidate as part of the employment offer.**

**Department Chair**      Approved     Denied

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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**Dean**      Approved  Denied

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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**Chief Financial Officer**      Approved     Denied

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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**Provost**      Approved  Denied

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Business Office Use Only				
<b>Approved Budget:</b>				
AY:	AY:	AY:	Total	
\$	\$	\$	\$	
BO Initial:	Date:	Account Created:		

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## SURF Roadmap

