Minnesota State University, Mankato

GRANT WRITING INCENTIVE

**Application Cover Page**

Name

Faculty ( ) Staff ( )

Years of service at MSU (including this year):

College/Division and Department/Program:

Period for which grant writing support is requested:

Date of previous Grant Writing Incentive award (if applicable):

***Please note – An applicant, as an individual or team, may only be funded once every three years.***

Per the guidelines, does the grant require any matching funds?

***\*If yes, fill in corresponding matching fund amounts below.***

I acknowledge that I must provide evidence of submitting my grant proposal to receive all funding.

Applicant Signature Date

Department matching funds, if applicable:

Department Chairperson or Date

Program Director Signature

College/Division matching funds, if applicable:

Dean/Division Signature Date