APPLICATION FOR RELEASED TIME FOR THE PURPOSE OF DEVELOPING
A GRANT PROPOSAL FOR THE 2003-2004 ACADEMIC YEAR

Part 1.
Name and Rank ________________________________________________________________

Department/School _________________________________________ Date ______________________

1. A one-course release is requested for the:
   _____ Spring 2004 Semester

2. Tentative proposal title (and 1-2 sentences on area of interest)
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

3. Is this a _____ continuation of your present research, or
   _____ A new area of research?

4. Tentative list of potential sources of funding that you have either investigated, or intend to
   investigate _______________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

5. Has the funding sources issued an RFP, or RFA, or other such announcement for an
   upcoming solicitation? _____Yes _____No

6. Have you been funded previously by any of these agencies? _____Yes _____No

7. Are you (or will you be) working on this proposal with any other faculty? _____Yes _____No
   If yes, _____ at Pace University? _____same campus? _____other institution(s)?
   Please specify _______________________________________________________________
8. Will you applied for, and/or be receiving, Released Time or other support from Pace University in the same semester for something else? ___Yes ___No.
   If yes, please specify ______________________________________________________

9. Have you received Released Time in the last three years?____Yes____No
   If yes, please specify. What were the results?
   ______________________________________________________________________
   ______________________________________________________________________

10. Signature of your Department Chair    __________________________________

11. Signature of your Dean                        __________________________________

Optional Information:

12. Have you checked if the agency/foundation has a net site, or information in the Foundation Center net site (www.fdncenter.org)?
   ______________________________________________________________________

13. Have you contacted the agencies or interest? ______________________________________

   Please provide any other pertinent information and considerations: (Add pages as needed).

Part 2. – One Page Summary of Proposal