

Rayce Rudeen Foundation Research Funding Request

Please Fill Out This Form Completely

To be considered for an award, please submit this form to the College of Nursing Associate Dean for Research, Dr. Julie Postma at jpostma@wsu.edu. Further instructions will be given upon award.

The guiding document for this award states: The distributions from this fund shall be used to support an undergraduate or graduate student in the College of Nursing who is completing research related to addiction or behavioral health. Funding will be used for research purposes. This may include, but is not limited to, production and implementation of surveys, transcription, equipment, and/or materials. Awards level is \$1500 or more.

A. Applicant Information:

Date (mm/dd/yyyy):

First Name:

Last Name:

Program of study: Undergraduate Undergraduate Honors

MN PHD DNP

Campus: Spokane Yakima Tri-Cities Vancouver

Request Date: Year _____

Semester: Fall Spring Summer

B. Research

Is research related to: Addiction Studies Behavioral Health

Name of research project:

Brief description of project and desired objectives:

C. Request

1. Explain how this funding will support your research. This may include, but is not limited to, production and implementation of surveys, transcription, equipment, and/or materials.

2. Other Information: If there is additional information you feel is pertinent to this request, enter it here. Please be brief.

D. Estimation of Costs

Travel expenses related to the production of research (this may include travel to conduct interviews and/or surveys).
Conference fees and travel are not included:

\$ _____

Materials: (Please outline)

\$ _____

\$ _____

\$ _____

Assistance: (Please outline)

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Estimate of total costs:

Administrative Action

Award Outcome: Approved Declined

Amount Approved: \$

Budget Number:

Approved by:

Date of approval:

Additional Notes: