**Butler Awards Committee**

Fine Arts, Humanities and Social Sciences (Qualitative Research Methods)

**Mini-Grant Application**

Please complete the cover sheet and budget form by entering information into the data boxes and attaching additional documents as required by the guidelines for a BAC mini-grant.

Once the application is complete, including all of the required signatures, please scan the entire application package into one PDF file and send an electronic version to the Butler Institute for Research and Scholarship at [osp@butler.edu](mailto:osp@butler.edu). Hard copies of applications will not be accepted. Proposals submitted that do not comply with current BAC mini-grant guidelines will be returned without review.

**Applications for mini-grants are accepted on the first of each month.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: | E-Mail: | | Phone: | |
| College: | Department: | | | |
| Number of years at Butler: | Not tenure-track: | Tenure-track: | | Tenured: |
| Total dollar request ($500 maximum): $ | | | | |
| Project title: | | | | |

**SIGNATURES**

Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair/Program Director\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BAC Mini-Grant Application**

**Budget Form**

**Grant request (total from all categories cannot exceed $500.)**

Materials and supplies $

Equipment $

Travel ($.56\* per mile if driving) $

Publication purchases $

Other (please specify, see next section) $

**Total grant request $**

\**or current mileage rate*

Please explain costs below**.**

**CHECKLIST**

Cover sheet (including signatures)

Budget form

Program statement

Appendix (optional)

If successful, my application may be shared as an example for other applicants: Yes  No

|  |
| --- |
| For OSP Internal Use Only  Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Not approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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