Application
Sponsored Research Appointment

Sponsored Research Appointments are available to full-time UMBC faculty members who have sufficient funding from external sources to supplement their academic year salary by at least 20%, plus a proportional share of <u>all</u> fringe benefits. Details of the policy governing Sponsored Research Appointments are available at https://provost.umbc.edu/resources-for-faculty-staff/sponsored-research-appointments/ **along with a document providing questions and answers concerning the policy and its implementation.**

To apply for a Sponsored Research Appointment for fiscal year 2021, please provide the information requested below and ***include the official notice of grant/contract award for each project that will support your appointment***. Alternatively, you may document your support with an *Award Information Sheet* from the Office of Sponsored Programs. Sign the application; have it signed by your Department Chair and College Dean, and submit it to Patrice McDermott, Vice Provost for Faculty Affairs, by **Friday, April 24, 2020.**

Name:_____ **% Salary Supplement** (max 33.3%):_____

Rank:_____ **Department**:_____

Campus Phone: _____ Fax**:**_____ **E-mail:**_____

Requested SRA Start Date: _____ **July 1, 2020** _____ **August 23, 2020**

Please indicate, by checking one of the boxes below, whether you are a new applicant or are renewing your SRA appointment:
☐ New Application ☐ Renewal Application

** If changing from a July 1 start date, you need to verify that funds are available to cover the extension of your current Sponsored Research Appointment.

Please provide the following information for each sponsored project that will be used to support this appointment (attach an additional sheet if necessary):

Project Title:_____

Sponsor:_____ **UMBC Project #:**_____

Start Date:_____ **End Date:**_____

Total Direct Costs:_____ **Total Indirect Costs:**_____

Project Title:_____

Sponsor:_____ **UMBC Project #:**_____

Start Date:_____ **End Date:**_____

Total Direct Costs:_____ **Total Indirect Costs:**_____

I have read the policy on *UMBC Sponsored Research Appointments*, the *UMBC Implementation Procedures for the Policy Enabling Twelve-Month Faculty to Accumulate Annual Leave*, and the *UMBC Policy on Additional Compensation* and agree to abide by their terms.

Signed:_____ **Date:**_____
Faculty Member

Recommended:_____ **Date:**_____
Chair

Recommended:_____ **Date:**_____
Dean

Recommended:_____ **Date:**_____
Vice Provost for Faculty Affairs