

COVER PAGE

CSU Biotechnology (CSUBIOTECH) 2024 FALL FACULTY TRAVEL GRANT PROGRAM

Proposal Due Date: Monday, October 7, 2024, before 5:00 p.m. Pacific Time

Applicant Information

Name	PI Academic Title	Email
Campus	Department	Indicate with a yes or no if you have been found to be in violation of Title V, Title IX, or CSU Executive Orders 1096 or 1097 in the last 5 years.

Specific Details of Meeting, Workshop or Facility/Site Visited

Name (provide full name of meeting, workshop or site, do not use abbreviations or initials)		
Budget Requested (max. = \$1,500)	Dates (between Jan. 1, 2025 – Dec. 31, 2025)	Location (City, State and Country):

Primary Purpose of Travel	Check only one box	Check the appropriate box
My primary purpose for travel is to attend a biotechnology-related meeting or conference.	<input type="checkbox"/>	<input type="checkbox"/> Presenting <input type="checkbox"/> Organizing <input type="checkbox"/> Attending Only
My primary purpose for travel is to attend a biotechnology-related workshop.	<input type="checkbox"/>	<input type="checkbox"/> Attending <input type="checkbox"/> Organizing
My primary purpose for travel is to collect biotechnology-related data at a shared instrument facility or research site.	<input type="checkbox"/>	

Applicant Certification

By signing this application, I the undersigned, certify that the statements herein are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may result in the removal of this application from review, termination of the grant and reporting to applicant's appropriate campus authorities. In addition, I certify I will adhere to all campus regulations related to travel, including preauthorization, export controls, training and insurance requirements. I authorize my campus to disclose to the CSUBIOTECH program office any substantiated violations of Title V, IX, or CSU Executive Orders 1096 or 1097.

Signature

Date

CSU Institutional Certification – Dean or Campus-Authorized Designee

Chief Research Officers and Vice Presidents of Research system-wide request that CSUBIOTECH proposals be routed through campus grant "clearance" mechanisms to ensure compliance with relevant federal, state and university regulations and policy. By signing this application, we or our campus-authorized designee, acknowledge that our institution has reviewed the proposed project and supports this grant application.

Signature

Print Name

Date

Applicant:

Campus:

Travel/Event Destination:

Use only single-spaced text, 12-point Times New Roman font or 11-point Arial font with 0.75-inch margins for all text entries in this proposal template. Failure to follow these guidelines and the page limits described in this template may result in proposal rejection during administrative review.

ABSTRACT AND/OR PROJECT DESCRIPTION

Meeting/Workshop: If you are presenting, provide abstract to be submitted, submitted or accepted. Make sure to include title, list of authors, introductory information, and a clear explanation of the project goals, methodology, results, and conclusions. If your submitted or accepted abstract does not include all this information, add a second paragraph containing the information. If you are not presenting, describe the usefulness of attending the meeting/workshop. If you are organizing a session, provide specific details.

Facility/Site: Describe the data collection planned and the original research project that will be supported by data collection.

This abstract/project description may be posted on the CSUBIOTECH website if the project is funded. Do not include proprietary information.

Limit ¾ page.

SAMPLE

Applicant:

Campus:

Travel/Event Destination:

DESCRIBE THE RELEVANCE OF PROPOSED TRAVEL TO YOUR ONGOING EDUCATIONAL PROGRAMS AND/OR RESEARCH PLANS

Explain how the proposed travel will advance your professional, educational and/or research objectives. Limit ½ page.

DESCRIBE SECONDARY BENEFITS OF YOUR PLANNED TRAVEL

For example only: You might be presenting research results and also attending a professional development workshop listed on the conference schedule, or you will collect research data and also learn a new technique. Limit ½ page.

SAMPLE

Applicant:

Campus:

Travel/Event Destination:

BUDGET REQUESTED

Provide an approximate dollar amount for each category. Provide dollar amount of matching funds or other resources that make travel feasible if the maximum CSUBIOTECH travel award (\$1,500) will not cover entire cost of trip. **Limit 1 page.**

Budget Category	Amount Requested (\$)
1. Transportation	
Transportation Category Subtotal:	
2. Lodging	
Lodging Category Subtotal:	
3. Meals	
Meals Category Subtotal:	
4. Registration List the registration fee for meeting /workshop and/or fee for using specialized facility or site	
Registration Category Subtotal:	
5. Other	
Other Category Subtotal:	
TOTAL AMOUNT REQUESTED FROM CSUBIOTECH (Maximum Request = \$1,500):	\$
6. Other Sources of Funding (funds available, if the maximum CSUBIOTECH travel award does not cover entire cost of trip)	
TOTAL AMOUNT OF OTHER SOURCES OF FUNDING	\$

Administrative Note: CSUBIOTECH grants are issued as a result of an internal competition within the CSU and are not subject to Facilities and Administrative (F&A), or indirect, costs. F&A costs are not allowed as a grant-funded expense in proposals submitted in response to RFPs from programs, like CSUBIOTECH, that receive the majority of their support from legislatively appropriated funds, CSU lottery funds or student fees (including State University fees). The F&A foregone at the campus/auxiliary's federally negotiated off-campus rate may be shown as cost match on the proposal. This amount may be used by the auxiliary or enterprise fund as an offset to the university's cost allocation plan, in accordance with EO 753/1000.

Applicant:

Campus:

Travel/Event Destination:

BUDGET JUSTIFICATION

Explain why you need travel support. If the total for the expenses you itemized above is greater than the amount you are requesting, you must explain how you will finance the additional expenses that make travel feasible. Justify your request for lodging if you live within commuting distance of the meeting, workshop or facility/site. Limit ½ page.

SAMPLE