



University Transportation Center

Proposal Cover Sheet



	Name	Department	Phone	Email
Principal Investigator:	_____	_____	_____	_____
Co-investigators:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

Project Title: _____

Project Type: Research Education/Training Outreach

Project Status: New Renewal/Continuation Supplement Resubmission

Project Abstract: (At most 200 words; describe the key objectives of the project)

Project Budget

Personnel (Faculty, full-time) Salary + fringe	
Graduate Student Stipends + fringe	
Graduate Student Tuition	
Materials and Supplies	
Travel	
Total	

Amount Requested: _____

Total Project Cost: _____

Project Start Date: _____

Project End Date: _____