



# FACULTY START-UP REQUEST FORM

Please use this form for all start-up requests. All requests must include a résumé/CV, research plan, and an explanation for the use of funds. Allow 5 business days for approval process. Upon approval, a copy of this form will be returned to the department chair/dean.

Candidate's Name

Actual or Anticipated Date of Offer

Employment Start Date

Department

College/School

## Amount of Start-Up Request

10%
90%
100%

Department			
College/School			
Other			
Office of Research			
<b>Total</b>			
Course Release (# of Credit Hours)			
Total Cost of Course Release (*See formula below)			

\*Formula: (9 Month Salary / 24) x Released Credit Hours x 1.35.

NOTE: If lab space renovation or construction is required, please also complete the "New Hire Research Space Renovation Form" and submit that form to the Provost Office.

Department Chair/Director

Name (please TYPE or PRINT legibly)

Signature

Date

College/School Dean

Name (please TYPE or PRINT legibly)

Signature

Date

Send completed form and attachments via email to: Joy Yard at [j.yard@csuohio.edu](mailto:j.yard@csuohio.edu) and Roman Kondratov at [r.kondratov@csuohio.edu](mailto:r.kondratov@csuohio.edu)

Approval

Meredith Bond, Interim Vice President for Research and Innovation

Date

Nigamanth Sridhar, Interim Provost and Senior Vice President for Academic Affairs (only necessary if requesting more than \$50,000)

Date