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**Cover Page (2017 Funding)**

|  |
| --- |
| Project Title: Click here to enter text. |
| Principal Investigator: Click here to enter text. |

|  |
| --- |
| Collaborators: Click here to enter text. |
| Campus Mailing Address: Click here to enter text. |
| Email: Click here to enter text. |
| Phone #: Click here to enter text. |
| Umbrella Project/MICL#: Click here to enter text. |

|  |  |
| --- | --- |
| **Program Area (check one)** | **Money & Duration of Project** |
| Applied Research | Total Duration of Project: Click here to enter text. |
| Extension | $$ Requested FY17 Only: Click here to enter text. |
| Seed Funding | Total Funds requested: Click here to enter text. |

**Proposal Summary (limit to 250 words):**

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**Budget Form (2017 Funding)**

|  |
| --- |
| **Project Title:** |

**Michigan Alliance for Animal Agriculture Funding Requested**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Budget Item** | **FY17 Request** | **FY18 Request** | **Matching Funds Committed\*** | **In-Kind**  **Contributions\*** |
| **Personnel Wages**  A1. Research associates & post-docs |  |  |  |  |
| A2. Technical/Administrative Support |  |  |  |  |
| A3. Other |  |  |  |  |
| A4. Fringe Benefits\*\*  (Must be charged as direct costs.) |  |  |  |  |
| B. Graduate students – including fringes\*\*\* |  |  |  |  |
| C. Undergraduate students\*\*\*\* |  |  |  |  |
| **Subtotal A+B+C #1** |  |  |  |  |
|  |  |  |  |  |
| D. Materials, Supplies & Publications |  |  |  |  |
| E. Travel |  |  |  |  |
| **Subtotal D+E #2** |  |  |  |  |
| **Grand Total #1 + #2** |  |  |  |  |

\* Identify sources, amounts and status of non-M-AAA funds. Informational only, this will not be tracked by CGA/OSP

\*\* Use MSU Contracts and Grants Web site to calculate fringe rate for MSU personnel

\*\*\* List graduate student costs as a lump sum

\*\*\*\* Fringe benefits are not charged to wages for MSU undergraduate students.

**Matching Funds (Including In-Kind) Section: *Use additional sheet if necessary***

|  |  |
| --- | --- |
| **Source** | **Amount** |
|  |  |
|  |  |