

Project # _____ (assigned by CMPM)

CORN MARKETING PROGRAM of MICHIGAN 2026 Research Proposal Cover Page

Proposal Title:

Project Team Leader:

Additional Team Members:

University or Company:

Department:

Mailing Address:

Email address:

Phone number:

Project Type

- First-time application of this project \$ _____
- Previously funded CMPM project, year # _____ \$ _____

Expected Project Duration (# of years): _____

Check all that apply

Original research Applied research Education, outreach and/or demonstration

The CMPM funding cycle operates on a rolling basis. Please list:

Expected initiation date of project: _____

Expected completion date of project: _____

CMPM research priority areas. Select all that apply to this project:

Enhance the value of corn through new and expanded markets
Set a higher standard for Michigan grain quality
Increase Corn Utilization

Where applicable, answer the following questions.

- Do you have previous or pending funding from other sources for this research? Please list sources and amounts.
- Matching funds are not required by CMPM. Do you have matching funds secured or pending?
- Will any background Intellectual Property be necessary to perform the proposed research?
- Will there be freedom to operate around current IP?
- Do you expect new Intellectual Property to be developed?
- Would you be willing and able to enter into a research agreement with licensing opportunities and/or royalty streams to CMPM if relevant to the project?

Signatures:

Team Leader: _____ Date: _____

Unit Administrator: _____ Date: _____

Project Budget Form

Corn Marketing Program of Michigan FY2026 Funding

Project # _____ (assigned after submission)

Project Title:

Project Team Members:

Funds Requested	
Budget Items	For annual grant period
A. Personnel wages	
A1. Research assoc. & post-docs	
A2. Other professionals	
A3. Secretarial & clerical	
A4. Technical, shop & other	
A5. Undergraduate students	
A6. Graduate students	
B. Fringe Benefits (must be charged as direct costs). (Sum A1 to A4 x fringe rate*)	
C. Total Personnel Costs (A+B+C)	
D. Nonexpendable equipment (Attach explanation if any item exceeds \$1,000)	
E. Materials & Supplies	
F. Travel	
G. Publications	
H. Other Direct Costs (List items, cost and explanation)	
TOTAL	

*Fringe rate is _____%.

Please note: The CMPM does not pay overhead.

Budget Narrative

Provide information on what the dollars will be spent on in each category and rational for these budgeted line items. Describe how the budget request relates to the success of the project by line item. The budget narrative is not included in the page limit.