

RESEARCH EQUIPMENT RESERVE FUND (RERF) Application Form for 2018

Submission Instructions:

Submit this completed application form and the following documents electronically as a PDF document to Incentive.Programs@oregonstate.edu (**signatures required**).

- Item 3: Resubmittals: letter to address reviewers' comments
- Item 4: Justification for Emergency / Health and Safety request (if applicable)
- Item 5: Suggested reviewers (provide three)
- Item 8: Letter(s) of endorsement (required)
- Item 10: Equipment specifications, cost quotes
- Item 11: Operation and maintenance budget
- Items 13 – 17: Description of equipment request
- Item 18: Fabricated Equipment Unit Pre-approval Form (if applicable)
- Item 19: Biosketch for Principal Investigator
- Item 20: Prior Funding
- Item 21: Signatures

Attach documents to the back of the original application and include in the PDF document.

Proposals must be received by 5:00 P.M. [PST] on the deadline date. Firm Deadline

Incomplete proposals and proposals NOT following the guidelines and format (including spacing, font size, margins and page limits) will NOT be considered for funding.

To review RERF program guidelines go to: [Research Equipment Reserve Fund \(RERF\)](#)

RESEARCH EQUIPMENT RESERVE FUND (RERF) Application Form for 2018

1. **Principal Investigator (PI) Name** _____
Rank: _____
Department: _____ **College:** _____
Phone: _____ **Email:** _____

2. **TITLE of Requested Equipment:** _____

3. **Is this a resubmittal:** Yes No

If so, you must provide a letter explaining how you have specifically addressed the reviewer' comments from the previous submission (*limit one page*).

4. **Equipment information:**

(*check one*) New Purchase/Construct Upgrade Existing

(*check one*) New Capability Replace/Repair Existing Equipment

(*check if applicable*) Emergency Request Health and Safety Related Action
Justification required (*limit one page*).

(*check one*) Intended to serve the needs of a single research group
 Intended to serve as a departmental or Research Center resource
 Intended to serve as a broadly accessible shared facility or service center
 Intended to serve both research and instructional missions of OSU

NOTE: If the equipment, facility, or services are to be accessible in any way to the greater OSU community, upon receiving an award you are asked to provide the information for the Shared Facilities resource at <http://research.oregonstate.edu/shared-research-facilities-and-services>.

5. **Suggested Reviewers (provide three names):**

Name	Area of Expertise	Title	Dept.	College	Email

Conflict of Interest: Suggested reviewers should not be in the same department, have served as co-authors or co-investigators with the PI in the last five years, nor should they be collaborators on this proposed project. Similarly, PIs should not suggest former post-doctoral advisors, or former students as potential reviewers. These policies are established to minimize the risk of a potential conflict of interest in the review process. Failure to abide by these policies will result in administrative withdrawal of the proposal.

NOTE: Eligible proposals are generally reviewed by two non-Research Council reviewers (possibly including individuals suggested by the PI) and one Faculty Senate Research Council member.

6. Where will the requested equipment be housed? _____

Who is the primary custodian (if different from PI) _____

7. Co-Investigator(s) (Co-Is) Information:

Name	Department	Phone	Email
1)			
Role in the project:			
2)			
Role in the project:			
3)			
Role in the project:			

8. Other investigators who support this acquisition/action:

NOTE: The PI must obtain a letter of endorsement (*limit one page*) which consists of a signed acknowledgement from each of the individuals listed stating that they have agreed to be so recognized and certifying that they have a legitimate need for the equipment being sought in the proposal. (*Investigators other than PI or Co-I(s) who will use the requested equipment*).

Name	Department or Professional Organization	College (if applicable)	Email

9. DETAILED BUDGET:

	Amount Requested <u>Round to Whole Dollars</u>
Total Cost of Equipment	
Matching Funds (See table below)	
TOTAL RERF FUNDS REQUESTED (Total Cost of Equipment minus Matching Funds)	

Total Cost of Equipment	Minimum percentage of total from Matching Funds
\$10,000 to \$40,000	20%
\$40,001 to \$75,000	25%
\$75,001 to \$100,000	32%
Over \$100,000	40%

SIGNATURE(S) of Individual(s) Authorizing Matching Funds (REQUIRED)	Date	Index of Source of Matching Funds	Amount	% of Total Cost
Research Office Investment		RO	\$	
			\$	
			\$	

			\$	
			\$	
		TOTALS	\$	100.0%

- **Itemize** each source and amount of matching funds, **signature(s) required** of the individual(s) authorizing funds. Grant funds may be used for matching funds, but RERF money may not replace funds originally budgeted in the grant to purchase the requested piece of equipment.
- Please check with your accountant before listing restricted funds as a match source.
- Funds originating from the Research Office (e.g. capital equipment start-up funding) cannot be used as a source of the required match.
- Together, these amounts must equal the total amount of matching funds.

10. Provide equipment specifications, descriptions and cost quotes (*limit four pages*).

11. Provide an annual budget for operation and maintenance of the proposed equipment, indicate source of funds (*limit one page*).

12. Transfer Award Funds to Index:

Index Code	Activity Code	Fund	Dept./Unit to Transfer Award Funds
<p><i>(Contact your department/Business Center accountant for this Index Code – must have fund 001145. Account code 40101 must be used when purchasing inventoried capital equipment, and account codes in the 202xx minor equipment series must be used when the item cost is less than \$5,000.)</i></p>			

For items 13 – 17, use up to three additional pages to describe the equipment request (*single-spaced, 12 pt. font, one inch margins*). The information you provide will be evaluated using the criteria listed in the [RERF guidelines](#). Consider these evaluation criteria as you provide the following information:

13. Justification of the need for this equipment, including descriptions of the science/research being supported through this equipment request, and how, and by whom, the equipment will be used. (*see Evaluation Criteria in the Guidelines*)
14. Description of the research project(s) that will benefit and the potential for the leveraging of future funding opportunities if this proposal were funded. Ex: does the project develop pilot data to support an application to an upcoming NSF request for proposals?
15. Description of partnerships with industry or other external collaborations (*if applicable*).
16. Brief statement describing how the proposal aligns with the *Three Signature Areas of Distinction* in the OSU Research Agenda: **“Advancing the Science of Sustainable Earth Ecosystems; Improving Human Health and Wellness; and Promoting Economic Growth and Social Progress”** and specifically, how the proposed work aligns with the three main *Research Thrusts*, as listed in OSU Research Agenda (<http://oregonstate.edu/research/research-agenda>):
- How do natural systems work and how can we live sustainably within them?
 - What factors and systems influence and promote health, wellness and long-term quality of life?

- What fundamental understanding, discoveries and solutions are needed to advance economic and social well-being?

17. Description of similar equipment/facilities available on campus. If such equipment is available, describe why this procurement/repair is justified. (*see Evaluation Criteria in the Guidelines*)

18. Fabricated Capital Equipment <http://oregonstate.edu/fa/manuals/pro/210> - A **signed** OSU Fabricated Equipment Unit Pre-approval Form and basic schematic diagram which demonstrates how the parts work together are **required** (*if applicable*).

19. Biosketch for the Principal Investigator; list education, academic/professional appointments, up to five publications closely related to the proposed equipment request, and up to five other significant publications (*limit two pages, single-spaced, 12 pt. font, 1 inch margins*).

20. Prior funding from the Research Office (*FRT, GRF, RERF, start-up funding, etc.*) during the past five years. (*Include source, amount, dates, and project title(s). Indicate whether all required final reports have been appropriately submitted. Recipients who fail to submit the required final reports will be ineligible to receive future funding from the Research Office, Incentive Programs.*)

21. SIGNATURES (required):

_____ Date: _____
Principal Investigator Signature

The signature of the PI gives Oregon State University, Research Office permission to post the final report on the Research Office web site for the sole purpose of sharing information about research.*

_____ Date: _____
Department Head/Chair Signature

_____ Date: _____
College Dean Signature

* If there is a valid reason for not wanting the final report posted on the web site, submit the justification (*limit one page*).