

**East Tennessee State University
College of Nursing**

**Center for Nursing Research
Student Scholar Program
Proposal Routing and Approval
Form**

The Center for Nursing Research supports research produced by faculty members on an as-available basis. Faculty may apply one time each fiscal year to the Center for Nursing Research for funds up to \$1,000. The number of awards will depend upon the yearly availability of funds.

This form must be accompanied by three copies of the proposal and one copy of each investigator's curriculum vita.

Date:

**Student Applicant
Name:**

**Faculty Member Chair,
Lead, or Advisor:**

Faculty Member Program:

Title of Research or Quality Improvement Project:

Amount Requested: \$ _____

Student Signature

Signature

Date

Faculty Member Signature

Signature

Date

Program Director

Signature

Date

Do not write below this line.

Research Council:

Approved

Not Approved

Attach Co-Investigator signature page if applicable.

**East Tennessee State University
College of Nursing**

**Center for Nursing Research
Student Scholar Program
Proposal Routing and Approval
Form**

Co-Investigator Signature Page

Faculty Member/Co-Investigator:

Faculty Member Program:

Faculty Member Signature

Signature

Date

Program Director

Signature

Date

Faculty Member/Co-Investigator:

Faculty Member Program:

Faculty Member Signature

Signature

Date

Program Director

Signature

Date

Faculty Member/Co-Investigator:

Faculty Member Program:

Faculty Member Signature

Signature

Date

Program Director

Signature

Date