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| Text  Description automatically generated | **Instructions:** <https://www.washington.edu/research/or/matching-funds-request/>**Complete form, obtain signature approvals from all contributing units and attach any relevant details.** **The Dean’s Office should submit the signed form as an e-mail attachment to: orfunds@uw.edu.** |

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| --- | --- | --- | --- |
| Today’s Date |  | eGC1#  |  |
| PI name |  | PI title |  |
| Department  |  | College/School |  |
| Funding agency |  | Deadline |  |
| Project start date |  | Project # of years |  |

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| --- | --- |
| Title of Proposal |  |
| FOA Link |  |

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| Yes or No | Is match required by the FOA? |
|  % | FOA % match required, if specified. |
|  % | Funder’s indirect cost rate. |
| Yes or No | Is this application for a center, institute, or organized research unit? |
| Yes or No | Is this application for equipment? |
| $ | Total $ requested of agency. |
| $ $ | Total matching funds committed from other units. Specify sources and amounts. |
| $ | Total $ request from Provost (no more than 1/3 of the total institutional match with a maximum of $350,000). |
| Y1Y2 | For multi-year projects, provide the annual breakout of funds requested from the Provost, e.g. Y1 $50,000, Y2 $25,000. Add lines as needed. |

General description of how Provost matching funds will support the project, e.g. equipment costs, salary, benefits, etc. (250 words):

If Matching is not required, provide evidence that matching funds are part of the evaluation criteria (100 words):

Project abstract (250 words):

Statement about how the project addresses expected criteria (see the Policy section on the [Matching Funds Request website](https://www.washington.edu/research/or/matching-funds-request/)) (250 words):

**Match Commitments supporting your request.** Copy and paste entries as needed so that each commitment is represented. ***Requests with missing commitment signatures will not be reviewed.***

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| --- | --- | --- | --- |
| Department/School |  | $ Amount committed |  |
| Printed name of person authorized to make this commitment |  | Signature of person authorized to make this commitment |  |

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| --- | --- | --- | --- |
| Department/School |  | $ Amount committed |  |
| Printed name of person authorized to make this commitment |  | Signature of person authorized to make this commitment |  |

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| Department/School |  | $ Amount committed |  |
| Printed name of person authorized to make this commitment |  | Signature of person authorized to make this commitment |  |