



CPR Application

2019-2020 Application

NAME:

FACULTY TITLE / DEPARTMENT / SCHOOL:

PHONE:

EMAIL:

SPONSOR YOU INTEND TO SUBMIT THE APPLICATION TO:

RFP NAME and NUMBER or LINK YOU INTEND TO SUBMIT THE APPLICATION UNDER:

DUE DATE OF PROPOSAL:

Application components:

- **Attach the abstract or draft proposal with application. A complete copy of the proposal will be requested upon approval of application from Sponsored Programs.**
 - **Attach prior reviewer comments if the request is for a resubmission**
 - **If applicable, attach list of sponsors with date of submission you have submitted the proposal to in the past**
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PI COMMITMENT

I agree to accept and incorporate all appropriate reviewer comments into my next proposal submission and I commit to submit by the next sponsor deadline after comments are received or when the proposal is in its most fundable state.

Signature: _____

Date: _____

The deadline for applications is on-going through May 31, 2020 until available funding is exhausted. You will be notified by email regarding acceptance within 7 working days of your submission. Submit your signed application form with all required attachments to SponsoredPrograms@tcu.edu.