

PROPOSAL TO THE

FOR SUPPORT OF A WORK ENTITLED

UNDER THE DIRECTION OF DR.

IN THE ACADEMIC UNIT OF

OF THE UNIVERSITY OF NOTRE DAME

Desired starting date: _____ Proposed duration: _____ months

Date of submission: _____ Amount requested: \$ _____

_____ Principal Investigator 1 Phone Number: _____

_____ Co-Principal Investigator 2 Phone Number: _____

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_____ Assistant Vice President, Director, Office of Research
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