

# SCHOOL OF MUSIC APPLICATION FOR A STUDENT RESEARCH REIMBURSEMENT ASSISTANCE

The School of Music is pleased to be able to support undergraduate and graduate student faculty-sponsored research. To apply for assistance, carefully complete this form, print it out, obtain the necessary signatures, and email completed forms to the Kim Velazquez [velazqkr@jmu.edu](mailto:velazqkr@jmu.edu). Students receiving assistance will be notified by e-mail. **Please submit one form per student requesting funding.**

**DEADLINE SEPTEMBER 30 @ 4PM**

Name of Applicant \_\_\_\_\_ Student ID number \_\_\_\_\_

JMU e-mail address \_\_\_\_\_ Undergraduate or Graduate Student \_\_\_\_\_

Type of activity (for example research project at a specialist library, survey of live subjects):  
\_\_\_\_\_

Location (if not in Harrisonburg--city, state): \_\_\_\_\_ Approximate Date(s):  
\_\_\_\_\_

Project Title: \_\_\_\_\_

**IMPORTANT: Project Narrative:** Attach a 2-4 page double-spaced typed narrative explaining the project. Describe the impetus for the project, the research question to be addressed, a schedule of activities and the expected outcome.

## **ESTIMATED EXPENSES (PLEASE LIST EXPECTED AMOUNTS OR WRITE N/A if NOT APPLICABLE)**

Materials needed to complete the project (give approximate amount needed and list materials on \_\_\_\_\_ a separate attached sheet)

Estimated Airfare \_\_\_\_\_

Personal Vehicle Mileage \_\_\_\_\_ Round Trip Miles \*.24 Rate/Mile \_\_\_\_\_

Lodging (NO AIRBNB) ([See Rate Table for Limits](#))\* \_\_\_\_\_ Nights @ \_\_\_\_\_ /Night \_\_\_\_\_

Meals ([See Rate Table for Per Diem Amounts](#))\* \_\_\_\_\_ Days@ \_\_\_\_\_ /Day \_\_\_\_\_

Other (Specify) \_\_\_\_\_

TOTAL EXPENSES \_\_\_\_\_

Anticipated Other Support (undergraduate students, please apply for an undergraduate research assistance from the College of Visual and Performing Arts) \_\_\_\_\_

NET PERSONAL EXPENSES \_\_\_\_\_

## **AFFIRMATIONS & APPROVALS**

By signing below, the student agrees that if awarded assistance, he/she will:

1. notify the Associate Director (Dr. Speare) as soon as possible if she/he does not follow through with the project so that funds can be redistributed to other deserving students.
2. submit a brief reflection regarding their experiences.
3. submit all receipts/forms requested of them by the School of Music staff by the deadlines noted in the award letter for reimbursement of funds.

Student signature and date: \_\_\_\_\_

TO THE FACULTY ADVISOR: Does this project need IRB approval? \_\_\_\_\_ (yes or no). If yes, please affirm that IRB application has been made \_\_\_\_\_ (yes or no). (For information about IRB approval, please see <http://www.jmu.edu/researchintegrity/irb/irbqa.shtml>). By signing below, the faculty supervisor agrees to assist the student in developing a high-quality professional product:

Name of Faculty Supervisor or Applied Teacher (PRINT NAME): \_\_\_\_\_ Signature and

Date: \_\_\_\_\_ \*<http://www.jmu.edu/financemanual/procedures/4215mie.shtml> (URL in case above links do not work)