 **Complementary Funding Request Form**

Mason faculty involved in proposals with other 4-VA institutions will be eligible to apply for **complementary funding of up to $5,000** to support cross university collaborative work.

**Title of Project:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposal Summary:**

|  |  |  |
| --- | --- | --- |
| Role | Name | University |
| Principal Investigator |  |  |
| Participant |  |  |

**Please identify which school(s) you are working with and the amount of funds received at host institution:**

|  |  |
| --- | --- |
| Institution | Amount |
| George Mason University |  |
| James Madison University |  |
| Old Dominion University |  |
| University of Virginia |  |
| Virginia Tech |  |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, along with those individuals listed above, have submitted the proposal to the host institution for grant funding. We request the amount indicated above as monetary support from Mason 4-VA.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Requestor sign and submit to the Mason 4-VA Campus Coordinator.  
  
Mason 4-VA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will support this grant proposal and will provide the indicated  
amount in monetary support for this project.

Mason 4-VA will send copy to Principal Investigator’s Institution.