# Research Equipment Competition Form

## Applicant(s)

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant | Applicant Name | Applicant Signature | Date |
| Principal Investigator |  |  |  |
| Co-Applicants |  |  |  |
|  |  |  |
|  |  |  |

## Request Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Equipment Requested |  | | | |
| Amount Requested |  | | | |
| Source of Matching Funds |  | | | |
| Type of Request | New Equipment | | Equipment Upgrade | |
| Equipment Maintenance | | Equipment Replacement | |
| Shipping/Delivery/Customs | | Equipment Training | |
| Software | | Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Placement | Snyder Core | Common area | | Individual laboratory |

Please attach quote or invoice (if retroactive) for the equipment.

## Justification

Check and complete the justification section for any item that is applicable to your application.

Note: Not all items need to be checked for the application to be considered.

|  |  |
| --- | --- |
| **Merit and Potential Impact** | |
| Enhances the research capabilities and profile of the investigator | Supports research that is currently peer reviewed funded |
| Justification: | Justification: |
| Enhances investigator’s ability to attract peer reviewed funding | Addresses a strategic priority of the Snyder Institute |
| Justification: | Justification: |
| Addresses a health outcome problem OR addresses a major block to research productivity | Has a plan for describing outputs and effectiveness |
| Justification: | Justification: |
| **Need** | |
| Similar equipment is not available in vicinity | Need to upgrade or replace obsolete or failed equipment |
| Justification: | Justification: |

|  |
| --- |
| Facilitates research that is not possible with the present infrastructure |
| Justification: |
| **Compatibility and Synergy** |
| Equipment realistically enhances the research endeavors of the co-applicants and other investigators |
| Justification: |
| Synergy with other equipment and/or research programs |
| Justification: |
| **Funds Requested** |
| Plans have been made to cover operating and maintenance costs |
| Justification: |