



**Application Information**

Principal Investigator: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Contact Email: \_\_\_\_\_  
Institution: \_\_\_\_\_

Co-Investigator(s): \_\_\_\_\_  
Contact Number(s): \_\_\_\_\_  
Contact Email(s): \_\_\_\_\_  
Institution (s): \_\_\_\_\_

**Funding Request (select one):**  
\_\_\_\_\_ \$1500      \_\_\_\_\_ \$2500      \_\_\_\_\_ \$3500      \_\_\_\_\_ \$5000 (max)      \_\_\_\_\_ Other

Please use the following checklist to ensure all components are included the submission packet.  
Submissions are to be sent to Dr. Jeff Rhody ([lakesidevc1@gmail.com](mailto:lakesidevc1@gmail.com)) and  
copy Marisa Hackemann ([info@aemv.org](mailto:info@aemv.org))

**Checklist**

- \_\_\_\_\_ Proposal
  - \_\_\_\_\_ Title Page
  - \_\_\_\_\_ Hypothesis and/or Objectives
  - \_\_\_\_\_ Rationale and Significance
  - \_\_\_\_\_ Budget
  - \_\_\_\_\_ References
  - \_\_\_\_\_ Appendices
    - \_\_\_\_\_ Principal Investigator CV
    - \_\_\_\_\_ Co-Investigator(s) CV(s)
    - \_\_\_\_\_ Two (2) Letters of Support
    - \_\_\_\_\_ Institutional Animal Care & Use Committee Form/Letter of Approval (or similar)