



6144 Clark Center Avenue  
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**Research Application Form**  
**Universal for ALL IWMF RFPs**

**Check one:**

- IWMF-LLS STRATEGIC RESEARCH ROADMAP INITIATIVE
- IWMF-LLS ENHANCED RESEARCH ROADMAP INITIATIVE
- ROBERT A. KYLE CAREER DEVELOPMENT AWARD
- IWMF RESEARCH SEED MONEY INITIATIVE
- IWMF-LLS COMPANION INITIATIVE

1. Project Title:

  

2: Applicant and Title's

Institution:

Department

Address:

Telephone:

Email:

FAX:

3. Name of Senior Researcher/Mentor for Project:

For the Kyle award only

4. Total Amount Requested:

5. Please provide the following information:

**Institution's Financial Officer for Grants Research:**

Name:

Title:

Address:

Telephone:

Email:



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**Other Contacts; Legal, Finance, Grant Officer, etc.: (Attach a separate sheet if needed for more)**

Name:  Title:   
Address:   
  
Telephone:  Email:

**Payment Remit to address if different from above:**

Name  Title:   
Address:   
  
Telephone:  Email:

Please add another sheet below if you need to add more people.

6. Have you cleared your proposal with your institution? Yes  No

7. Will the project require IRB approval? Yes  No

8. Will the project involve collaboration with any other person or institution?  
Yes  No

If yes, please describe:

Click or tab.



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**9. Will any collaboration require signing or IRB approval from other institutions or other third parties?** Yes  No

If yes, please describe:

**10. To be used if needed for additional clarification:**