



OFFICE OF SPONSORED PROJECTS

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TUITION COST SHARE REQUEST FORM

1. DATE:

2. OSP FILE #:

3. PROPOSAL TITLE:

4. PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR:

5. SPONSOR:

6. PROPOSAL DEADLINE:

7. DOES THE SPONSOR IMPOSE A CAP ON FUNDING? YES NO

8. IF YES, CAP AMOUNT:

9. TOTAL # OF GRA'S IDENTIFIED IN THE BUDGET:

10. TOTAL # OF WAIVERS REQUESTED (NOTE: ONE WAIVER IS RECOGNIZED PER GRA):

11. JUSTIFICATION:

SIGNATURE
PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR

DATE

APPROVED	DENIED	NOTES:
<p>_____ DIRECTOR, OFFICE OF SPONSORED PROJECTS</p> <p>_____ DATE</p>		

QUESTIONS REGARDING THIS FORM SHOULD BE DIRECTED TO YOUR APPROPRIATE OSP RESEARCH DEVELOPMENT SPECIALIST (RDS). RDS CONTACT INFORMATION CAN BE FOUND AT [HTTP://WWW.OSP.NIU.EDU/OSP/AUDIENCE/DEVELOPMENT_STAFF.SHTML](http://www.osp.niu.edu/osp/audience/development_staff.shtml) OR BY CALLING THE OSP MAIN OFFICE AT 753-1581.