**Research Enhancement Awards Form**

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**Milken Institute School of Public Health Research Enhancement Awards Form**

**Investigator Information**

First Name of Investigator



Last Name of Investigator



Email of Investigator



Investigator’s Department



Investigator’s Position Title/Track



**Award Information**

Title of Research Project for the requested REA



Purpose of requested funding



Amount of requested funding

**Limit of $1500**

Provide a brief overview explaining the requested fund's relevance to research activities, a statement of need, and a budget justification with a breakout of the requested funds.

The date the funding is needed.



Last updated 05/26/2023.

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[**Contact Information**](https://www.tfaforms.com/forms/help/4768162)

For questions and additional information, please contact the Office of Research Excellence at GWSPHResearch@gwu.edu.