

Purpose

The Pursuit of Extramural Support Travel (PEST) grant is to assist researchers by providing partial support for travel to meet with funding agencies or other sources of extramural support in order to (i) learn about sponsored programs opportunities, (ii) seek guidance on applying for external support, and/or (iii) describe researcher's ongoing and proposed work pursuant to (i) and (ii).

Restrictions

PEST grants will be made for up to one half of the total travel costs, to be matched by Departments and Colleges or the traveler.

The agencies and program officers to be visited must be listed in the PEST application.

Funds from this grant may not be used for travel to workshops, conferences, or other sites such as those of collaborators or partners. UNT Colleges frequently provide "supplement travel support" for these purposes. If visits to funding agencies are to be accompanying other travel, the PEST application will only be considered for the incremental cost of the visit to the funding agency (for example, for an additional night's hotel stay but not the air travel). Reimbursement will be based on actual expenses (up to the GSA per diem limit) and itemized receipts will be required. In addition, certain items may not be paid for using state funds, for example, alcohol, tips, and gratuities.

Eligibility

To be eligible for a PEST grant the faculty member must hold the academic rank of Assistant Professor or higher and be employed on a full-time basis in a permanent or tenure track position.

Selection Criteria

Priority will be given to requests that supplement funds from Department or College sources. If the faculty member self-funds the matching cost of the trip, a brief letter of support from the Department and College is recommended. Preference will be given to new faculty developing their research programs or faculty who are reinitiating or redirecting their research.

Deadline

Applications for PEST grants may be made at any time during the year. Generally, applicants will be notified within ten business days of receipt of the application.

Submission

Fill in each section of the application, obtain Department and College signatures attesting to their cost matching, and return to The Office of Research and Economic Development, Hurley Administration Building, or send a scanned image of the completed and signed form via email to "intramuralgrants@unt.edu."

OFFICE OF RESEARCH AND ECONOMIC DEVELOPMENT

PURSUIT OF EXTRAMURAL SUPPORT TRAVEL GRANT

Section I

Applicant Name: _____ Emplid #: _____
Phone Number: _____ Email: _____
Div./Dept./School/College: _____
Academic Rank: _____ Tenure Status: _____
Years at UNT: _____ Latest Degree and Year Completed: _____

Enter a description of the funding agencies and program offices to be visited and the sponsored program opportunities to be explored. Please include the specific names/titles of people, places/locations that you expect to visit and exact dates/times that these secured events will occur in pursuit of extramural support. If other travel is to be associated with the visits, indicate so and request support only for the incremental portion of travel expenses associated with the visit in the budget below.

OFFICE OF RESEARCH AND ECONOMIC DEVELOPMENT

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Project Budget

	TOTAL FUNDS REQUIRED	DEAN'S MATCH REQUESTED? <input type="checkbox"/> YES <input type="checkbox"/> NO AMOUNT \$ _____	DEPT. MATCH REQUESTED? <input type="checkbox"/> YES <input type="checkbox"/> NO AMOUNT \$ _____	REQUESTING FROM VP FOR RESEARCH
TRAVEL *				
Airfare	\$ _____	\$ _____	\$ _____	\$ _____
Lodging	\$ _____	\$ _____	\$ _____	\$ _____
Transportation	\$ _____	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____	\$ _____	\$ _____

**PEST travel funds may not be used for travel to workshop, conferences, or other meetings, or for certain items such as tips, gratuities, and alcohol.*

Section II – Signatures

APPLICANT:

Date:

(MM/DD/YY)

CHAIR:

(Printed name and signature for amount of match pledged)

Date:

(MM/DD/YY)

Amount of Match Pledged: \$

DEAN or DIRECTOR:

(Printed name and signature for amount of match pledged)

Date:

(MM/DD/YY)

Amount of Match Pledged: \$

Funds Granted: \$

Acct:

**Office of Research &
Economic Development:**

Date:

(MM/DD/YY)