



## Research Council Grant Routing Form

NOTE: The University MUST approve all internally sponsored programs before proposal submission  
(revised Feb. 2026)

INVESTIGATOR INFORMATION		
Title of Grant:		
Amount Requested:		
Principal Investigator:		
Title/Rank:		
College:		Department:
Principal Investigator Signature:		Date:
CO-PI Name:	CO-PI Signature:	Date:
CO-PI Name:	CO-PI Signature:	Date:
CO-PI Name:	CO-PI Signature:	Date:
CO-PI Name:	CO-PI Signature:	Date:
ABSTRACT		
Please submit a summary of your project with this form (400 word limit)		
ADDITIONAL INFORMATION		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is this research/project currently under review by another granting agency?	
If yes, please list the agency:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever received external funds for this proposal and/or a similar topic?	
If yes, please list the agency:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever submitted proposals to the Research Council that were not funded?	
If yes, list the Title/Topic and year submitted:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever submitted proposals to the Research Council that were funded?	
If yes, list the years and amount granted:		
ADDITIONAL APPROVALS NEEDED		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Human subjects involved in research? <i>If yes, contact Dr. Alaina Daigle at (986)448-4697 or at <a href="mailto:alaina.daigle@nicholls.edu">alaina.daigle@nicholls.edu</a> for approval.</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Non-human vertebrate animal subjects involved? <i>If yes, contact Michele Robichaux at (985)448-4761 or at <a href="mailto:michele.robichaux@nicholls.edu">michele.robichaux@nicholls.edu</a> for approval.</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Radiation and/or Biohazards involved? <i>If yes, contact Carolyn Kern at (985)448-4782 or at <a href="mailto:carolyn.kern@nicholls.edu">carolyn.kern@nicholls.edu</a> for approval.</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the proposal involve alterations/relocations/renovations of facilities? <i>If yes, a letter or email including the source account # and amount from VP of Facilities is required. Contact Danielle Breaux at (985)449-7041 or at <a href="mailto:danielle.breaux@nicholls.edu">danielle.breaux@nicholls.edu</a> for approval.</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the proposal use technology fee funds as a match? <i>If yes, a letter or e-mail including the source account # and amount from the Instructional Technology Specialist is required. Contact Randy LeBlanc at (985)448-4419 or at <a href="mailto:randy.leblanc@nicholls.edu">randy.leblanc@nicholls.edu</a> for approval.</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Will this project require any faculty or staff overload (i.e. adjunct/overload teaching assignments, etc.?)	
ADMINISTRATIVE APPROVALS		
<i>By signing and submitting this document, it verifies the endorsement of the Department Head and Dean of the Principal Investigator and acknowledges participation of all Co-Investigators.</i>		
Department Head:		Date:
Dean:		Date: