2019-2020 Lilly Fellows Application

Applicant Name:

Academic Rank/Title:

Lead College:

Department(s):

Campus Address:

Employment Date:

Phone:

E-mail:

Teaching Project Title:

Lilly Project Faculty Mentor:
   Academic Rank/Title:
   College/Department:
   Email:

<table>
<thead>
<tr>
<th>Lead Chair/Director/Supervisor of Unit</th>
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<tbody>
<tr>
<td>Name</td>
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<tr>
<td>Department/Unit</td>
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<td>E-mail</td>
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I give my support for the applicant to participate in the Lilly Fellowship Program for 2019-2020. Our department will match professional development funds in the amount of $8000 in support of this candidate’s success and scholarship in this teaching and leadership program.

Signature:

Additional Letter of Support
   Name:
   Academic Rank/Title:
   College/Department:
   Email:

Please return hard copies of completed application materials to: Dr. Patti Stewart, 308 Administration Building on or before April 1, 2019.
Application Materials Checklist

__ Completed application
__ A brief description of the proposed teaching project (one page). The project proposal should briefly identify the project goal and rationale, instructional context, project methodology, and approach(s) to assess attainment of the project goal. Please include the significance of the project for the individual, unit and/or disciplinary advancement of teaching and learning. To request additional information, contact Patti Stewart at ps@msu.edu.
__ Completed budget plan proposal that outlines how funds will be used, including any course release time negotiated with the chair, director or dean. Must be signed by the applicant and their supervisor.
__ Letter of support must be from the applicant's lead chair, director, or dean
__ Letter of support from proposed faculty mentor
__ Letter of support from additional faculty, academic staff or graduate student.
__ Personal statement: A one-page statement from the nominee that describes their reasons for seeking the Lilly Fellowship and provides evidence of interest in ongoing instructional improvement and/or the Scholarship of Teaching and Learning (SoTL).
__ Curriculum vitae.
__ Description of annual course load and advising responsibilities.
__ A list of courses taught at MSU detailing size and type (graduate, undergraduate major, non-major) as well as annual course load and advising responsibilities.

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Use of Lilly Funds-Planning Budget*

Release Time
__ Course release ______
__ Clinical Release time ______
__ Other, please specify: __________________________ ______

Projected Subtotal ______

Assistants
__ Hourly research assistant for data collection and data entry ______
__ Grader or coder to assist with the project or to assist with work in other courses ______
__ Postdoctoral scientist to assist in managing the Fellow’s laboratory and/or assisting with the preparation of research grants ______
__ Undergraduate Student Assistant for collating data and other tasks ______
__ Cost of part of a TA’s time to assist with the teaching project ______
__ Other, please specify: ________________________________ ______

Projected Subtotal ______

Resources/Materials/Technology
__ Technology/Equipment to be used as part of the project ______
__ Statistical software ______
__ Books, DVDs, and videos and other media related to the project ______
__ Laptop computer to be used to teach the computer-based parts of the course and to conduct the research project ______
__ Other, please specify: ________________________________ ______

Projected Subtotal ______

Travel
__ Travel, expenses, and registration to attend conferences on teaching in the disciplines and/or present findings of the project on teaching ______
__ Travel as part of the Lilly Project***, e.g., Meeting with international collaborators to plan an international educational experience, etc. ______
__ Other, please specify: ________________________________ ______

Projected Subtotal ______

(This should total but not exceed approximately $16,000)

Projected TOTAL ______

*Please fill in the amounts you think you will need to allocate for each category and check off the appropriate box. If you do not need a category, enter a 0. This is only a tentative budget and may be changed once the project design is finalized. It should reflect a discussion and collaborative agreement between the Lilly Fellowship Applicant and her/his supervisor.

** If the cost exceeds $16,000, the applicant’s department must cover the additional expenses.

***Funds can be used to present the Lilly Project at a conference the year following the fellowship pending approval from the chair/director and/or dean to carry these funds forward.

Signed:
Lilly Fellow Applicant: ___________________________ Date:______________

Lead Supervisor: ______________________________________ Date:______________

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