



Radiological Research Accelerator Facility

Columbia University Center for Radiological Research

www.raraf.org

Application for a Collaborative Research Project at RARAF

Principal Investigator: Click here to enter text.		Institution: Click here to enter text.	
Email: Click here to enter text.		Phone: Click here to enter text.	
RARAF Contact Person: Click here to enter text.			
Collaborative Project Title: Click here to enter text.			
Goals / Specific Aims of Collaborative Project: Click here to enter text.			
Which TR&D facilities at RARAF do you wish to use? Click here to enter text.			
Significance of Collaborative Project: Click here to enter text.			
Innovation of Collaborative Project: Click here to enter text.			
Approach of Collaborative Project: Click here to enter text.			
Relevant publications / prepublications: Click here to enter text.			
External Funding		Funding Agency: Click here to enter text.	
		Grant Title: Click here to enter text.	
		Grant Number: Click here to enter text.	
		Grant Dates: Click here to enter text.	
		Grant Abstract: Click here to enter text.	
Electronic Signature of PI*		Date Click here to enter text.	
<p><i>*Please note, by signing and sending us this application, you agree that</i></p> <ol style="list-style-type: none"> <i>1. You will acknowledge the support of this P41 program in any publications that describe work done at RARAF, quoting grant NIBIB 5P41EB002033</i> <i>2. You will inform your RARAF contact of any such potential publication</i> 			