



The Analytical and Diagnostics Laboratory (ADL) Application for Small Grants to Cover User Fees

The Analytical and Diagnostics Laboratory (ADL) at the S3IP is a centralized, multidisciplinary, fully-staffed research facility that supports faculty research in the physical and biosciences and engineering by providing instrumentation and technical consultation for materials diagnostics, analysis, characterization, and device processing.

ADL Small Grants are provided by S3IP in support of a faculty member's research program. Up to \$2,500 will be provided for periods of up to one year to cover User Fees generated in the S3IP Labs by a faculty member's research group. Requests to support activities leading to a proposal for external funding are given highest priority.

A faculty member may have only one active ADL Small Grant at a time. Recipients of support will be required to report on accomplishments as a consequence of funding 30 days after completion of the effort.

Applicants must provide a brief summary of the project and the need for funding in the ADL on the attached application form. The need for funds should be described in sufficient detail to permit evaluation by someone not familiar with the specific discipline. An indication of how support will enhance the quality of the research effort and how funding may lead to externally funded activity should also be included. The response should not exceed the space available on the application form.

Forward the signed form to S3IP, PO Box 6000, Binghamton, NY 13902-6000, or email to Maria Miller, millerm@binghamton.edu.

Requests for ADL Small Grants will be accepted at any time and will be reviewed approximately monthly.

Funding for the ADL Small Grants Program is made possible by support to S3IP from New York Empire State Development Division of Science, Technology, and Research. Any publications including results funded in whole or part from the ADL Small Grant shall cite this source.

Please contact Benson Chan, chanb@binghamton.edu, (607) 777-4349 if you have any questions or need any additional information.

*S3IP
PO Box 6000, Binghamton University
Binghamton, NY 13902-6000*

January 17, 2024

ADL Small Grant Application Form

APPLICANT: _____ Date: _____

School/Dept.: _____

Campus Phone: _____

PROJECT TITLE: _____

Project summary and small grant justification:

Amount Requested: _____

Start Date Requested: _____ Term Date: (one calendar year from start date)

Applicant Signature: _____ Date: _____

Department Chair Signature: _____ Date: _____

Authorized By: _____ Date: _____

Benson Chan

Approved By: _____ Date: _____

Bahgat Sammakia

Amount Approved: \$ _____ Start Date: _____ Term Date: _____