

## **Research Support Fund - Grant Application Form**

	mation		
Institution			
Tyndale University College &	& Seminary		
Contact Family Name		Contact Given Name	
Eng		Sandra	
Contact Position		Contact Department	
Controller		Business Office	
Contact Telephone number at instit	ution	Contact Fax number at institution	
Area Code Numb		Area Code Num	ber
416 226-66	20 2196	416 226-6	746
Contact E-Mail address at institution	n		
seng@tyndale.ca			
Expenditure categories			
Identify the areas of priority in which you	plan to invest your grant.		
Institution's investment in:	2017-2018	\$6,333	
Research Facilities		\$.00	.0 %
Research Resources		<b>*</b> • • •	
Research Resources		\$.00	.0 %
Research Resources Management and Administ	ration	\$.00	
Management and Administ			
		\$6,333.00	100.0 %
Management and Administ Regulatory Requirements a Intellectual Property	and Accreditation	\$6,333.00	100.0 % .0 %
Management and Administ Regulatory Requirements	and Accreditation prmation form that the terms and conditions	\$6,333.00	100.0 % .0 %

