

**REQUEST FOR MEDICAL SCHOOL FACULTY  
START-UP FUNDING**

**APPLIES TO:** Tenure Track Faculty Candidates

**PROCESS:** Department conducts search for tenure track faculty position and designates one candidate to receive offer. The Associate Dean for Research, Paul M. DeLuca, Jr., interviews this candidate. The Department identifies the research needs of this candidate and completes this form to request funding support from the Graduate School and the Medical School PRIOR to making any offer to the candidate. This form and supporting documentation must be submitted by email as WORD documents or as PDF files to the Associate Dean, at [pmdeluca@facstaff.wisc.edu](mailto:pmdeluca@facstaff.wisc.edu), and to Dr. Tracy Cabot, at [tlcabot@facstaff.wisc.edu](mailto:tlcabot@facstaff.wisc.edu). When available, a copy of the candidate's curriculum vitae should also be forwarded by email; otherwise, a hard copy should be faxed or delivered to the Associate Dean's office. Any questions regarding the process may be directed to the Associate Dean at 265-0523 or to Dr. Cabot at 263-6515. Please use this document as a template for submission.

1. **Candidate's Name:** \_\_\_\_\_  
(Attach current copy of curriculum vitae)
2. **Department:** \_\_\_\_\_
3. **Faculty Rank:** \_\_\_\_\_
4. **Center association** (if any): \_\_\_\_\_
5. **Laboratory space and location:** \_\_\_\_\_
6. **Synopsis of candidate research focus and relationship to Medical School Strategic Priorities.**  
(Attach brief 2-3 page statement of candidate's research interests)
7. **Anticipated collaboration with faculty research programs in other Schools, Colleges or disciplines:**
8. **Relationship to Departmental and/or Center research plans:** include collaborators and additional recruitment's expected in this research area.
9. **Itemized list of start-up needs:** Included each item such as equipment, remodeling, personnel, the cost of each item, and the total start-up requested, in spreadsheet form.
10. **Cost Sharing:** Identify proposed sources of start-up funding include the Department's commitment, any Center commitment, and request of the Medical School and the Graduate School.

\_\_\_\_\_  
Section Head (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair

\_\_\_\_\_  
Date

Received by Medical School Dean:

\_\_\_\_\_  
Date

Submitted to Graduate School:

\_\_\_\_\_  
Date