SCRA

FY24 SACT Grant Program
COVER SHEET FOR FULL APPLICATION

SOUTH CAROLINA RESEARCH AUTHORITY (SCRA) SOLICITATION NAME (Check one) **TRACK 1: LAB TO MARKET** **TRACK 2: CAPACITY BUILDING**	
NAME OF LEAD INSTITUTION	**DATE SUBMITTED**
PRIMARY CONTACT NAME	**PRIMARY CONTACT EMAIL**
TITLE OF PROPOSED PROJECT	

REQUESTED SCRA AWARD $	**MATCHING FUNDS** $	**TOTAL PROJECT AMOUNT** $
YEAR 1 SPEND $	**YEAR 2 SPEND** $	**YEAR 3 SPEND** $

PROJECT BLURB

If this project is selected for funding, it will be proudly announced in our newsletter, on our website, and other media channels. Please provide a brief summary that represents how your institution would like this project and its impact to be described to the broader public.

Submit Full Applications to academicinnovations@scra.org by February 1, 2024

Having trouble with this form? Our sincerest apologies for any inconvenience.
Please contact academicinnovations@scra.org for assistance.