



GRANT SUBMISSION COVER SHEET
(Use this form to submit a grant proposal funding agency)

I. Principal Investigator QR "Partner with another entity

Name: _____ E-mail: _____

Division: _____ Phone: _____

Internal Partners

II. Grant Information

1. Grant Title: _____ Type: _____

If a subaward, who is the fiscal agent?

2. Source: _____ If Federal, please choose:

If Foundation, please state:

If other, please specify:

3. Due date for grant submission:

III. Budget Information

1. Award Amount Estimate (per year and total)

	Year 1	Year 2	Year 3	Year 4	Year 5
Direct Costs					
Indirect Costs					
Total					

2. Matching costs required? _____ No _____ Yes, describe below:

3. IRB review required? _____ No _____ Yes, IRB signature:

IV. Signatures

Principal Investigator: _____ Date: _____

Division Dean: _____ Date: _____

College Business Officer: _____ Date: _____

Vice President of Instruction: _____ Date: _____

College President: _____ Date: _____

Send signed copy o College CBO, Dean, and VPI

Attach abstract or grant narrative summary (1 pg max)