

Submission Deadline: _

PROPOSAL REVIEW FORM

Please complete this form and attach all required components ALLOW TEN (10) WORKING DAYS BEFORE THE DEADLINE for processing within Sponsored Programs and Research. Call 410-951-3809 for assistance.

| 1. Project Director/Principal Investigator | SECTION A | | | | |
|--|---|--------------------------|--|---------------------------------|--|
| 3. Sponsor: □ Federal(CDFA# | 1. Project Director/Principal Investigator | | | | |
| 3. Sponsor: □ Federal(CDFA# | 2. Proposal Title | | | | |
| 4. Project Start Date: | | | | | |
| 5. Name of Sponsor: 6. | | | | | |
| 6. □ Renewal □Revision Account Number: 7. Letter of Support Needed? □ Prevotst □ President Note: for President LOS, allow 10 working days and ema chrooks@coppin.edu, this form, detailed abstract of proposal, and suggested sample letter 8. *If an IA AG. is checked in Item #3, include the □ IA RFP and □C ompleted Standard Interagency Agreemer SECTION B Funds Requested: (ATTACH BUDGET) \$ Proposed IDC rate:% (Univ IDC 49.5%) Cost Sharing/Matching Funds: \$ Proposed IDC rate:% (Univ IDC 49.5%) Final Budget Brief explanation of cost-sharing/matching funds-how will the department/unit match funds? | | | | | |
| 7. Letter of Support Needed? ☐ Prevost ☐ President Note: for President LOS, allow 10 working days and emaebrooks@coppin.edu, this form, detailed abstract of proposal, and suggested sample letter 8. *If an IA AG. is checked in Item #3, include the ☐ IA RFP and ☐ Completed Standard Interagency Agreemer SECTION B Funds Requested: (ATTACH BUDGET) \$ Proposed IDC rate:% (Univ IDC 49.5%) Cost Sharing/Matching Funds: \$ Final Budget | | | | _ | |
| Proposed IDC rate:% (Univ IDC 49.5%) Cost Sharing/Matching Funds: \$ | 7. Letter of Support Needed? ☐ Provost ebrooks@coppin.edu, this form, detailed abst | ☐ Presidentract of prop | nt <i>Note:</i> for President LOS, allow 10 working bosal, and suggested sample letter | g days and ema ency Agreemer | |
| Brief explanation of cost-sharing/matching funds-how will the department/unit match funds? | SECTION B | | | | |
| Who authorized?: | Funds Requested: (ATTACH BUDGET) \$Cost Sharing/Matching Funds: \$ | | Proposed IDC rate: % (Univ IDC 49.5% Final Budget |) | |
| This Project will be administered by the University CSUDF Note: grants to be administered by CSUDF must be signed by the ED of CSUDF and the University President. Payments must be made to CSUDF. SECTION C Indicate if your project contains any of the following: Human Subjects | Brief explanation of cost-sharing/matching fu Who authorized?: Re | nds-how wi lease Time | ill the department/unit match funds? for Faculty (Briefly explain): | | |
| signed by the ED of CSUDF and the University President. Payments must be made to CSUDF. SECTION C Indicate if your project contains any of the following: Human Subjects | What is expected of the institution for this gra | nt? Briefly 6 | explain the checked items in Section C | | |
| Human Subjects under the age of 18 Did IRB approve? Yes,Attach documentation No IACUC: Animal Subjects Sub-contracts (Risk Assessment Questionnaire (RAQ) Responsible Conduct of Research (RCR) Training Chemical/Physical Safety IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) Conflict of Interest SIGNATURE DATE Project Director/Principal Investigator Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | signed by the ED of CSUDF and the University | ty President | . Payments must be made to CSUDF. | CSUDF must b | |
| Human Subjects under the age of 18 Did IRB approve? Yes,Attach documentation No IACUC: Animal Subjects Sub-contracts (Risk Assessment Questionnaire (RAQ) Responsible Conduct of Research (RCR) Training Chemical/Physical Safety IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) Conflict of Interest SIGNATURE DATE Project Director/Principal Investigator Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | ☐ Human Subjects | | Early Research Experience for students/graduate assistants | | |
| IACUC: Animal Subjects Sub-contracts (Risk Assessment Questionnaire (RAQ) Responsible Conduct of Research (RCR) Training Chemical/Physical Safety IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) Conflict of Interest Support for Enrollment/Retention Conflict of Interest SUPPROVALS APPROVALS SIGNATURE Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | | | | | |
| Sub-contracts (Risk Assessment Questionnaire (RAQ) Responsible Conduct of Research (RCR) Training Chemical/Physical Safety IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) Conflict of Interest Support for Enrollment/Retention Support for Scholarly Work/Community Service SECTION D APPROVALS SIGNATURE Doan (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | | | New Course Development | | |
| Sub-contracts (Risk Assessment Questionnaire (RAQ) Responsible Conduct of Research (RCR) Training Chemical/Physical Safety IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) Conflict of Interest Support for Enrollment/Retention Support for Scholarly Work/Community Service SECTION D APPROVALS SIGNATURE Doan (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | | | Space Requirements | | |
| Chemical/Physical Safety Technology Needs IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) International Travel Partnerships Support for Enrollment/Retention Support for Scholarly Work/Community Service | Sub-contracts (Risk Assessment Questionnaire (RAQ) | | Export Control | | |
| IBC: Bio-Safety; Biological Materials (Recombinant DNA or RNA, infectious agents) Conflict of Interest Support for Enrollment/Retention Support for Scholarly Work/Community Service SECTION D APPROVALS SIGNATURE DATE Project Director/Principal Investigator Chair Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | Responsible Conduct of Research (RCR) Training | | Licensing/Maintenance Fee | | |
| DNA or RNA, infectious agents) Support for Enrollment/Retention Conflict of Interest Support for Scholarly Work/Community Service | | | Technology Needs | | |
| DNA or RNA, infectious agents) Support for Enrollment/Retention Conflict of Interest Support for Scholarly Work/Community Service | DNA or RNA, infectious agents) | | International Travel Partnerships | | |
| SECTION D APPROVALS Project Director/Principal Investigator Chair Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | | | Support for Enrollment/Retention | | |
| APPROVALS Project Director/Principal Investigator Chair Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | | | Support for Scholarly Work/Community Service | | |
| Project Director/Principal Investigator Chair Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | | T ======== | | | |
| Chair Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | APPROVALS | SIGNAT | URE | DATE | |
| Dean (College) Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | Project Director/Principal Investigator | | | | |
| Director (Sponsored Programs & Research) Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | Chair | | | | |
| Provost, VPAA/AVP VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | Dean (College) | | | | |
| VPIA, for CSUDF (Corporate/Foundations) Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | Director (Sponsored Programs & Research) | | | | |
| Controller, CSU or Comptroller, CSU Development Foundation President, Coppin State University | Provost, VPAA/AVP | | | | |
| Development Foundation President, Coppin State University | VPIA, for CSUDF (Corporate/Foundations) | | | | |
| | | | | | |
| (1/2 max A managed () = max 1/11 | | 16 | 1 CD 7/1/(2020) D 12 11 (2020) | | |