

Arts & Sciences Grants Administration

Intent to Submit for a Grant Proposal

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PRINCIPAL INVESTIGATOR & GRANT INFORMATION					
Principal Investigator					
List any Faculty not in Arts and Sciences					
Letter of Intent	Yes or	No	AOR Signature Needed	Yes or	No
Submission Method					
Sponsor			Prime Sponsor		
Funding Opportunity Number or Sponsor Application Number					
Proposal Dates	Begin Date		End Date		
Sponsor Program Name					
Date Due to Sponso					
Website for the Guidelines					
Will there be a Subcontract If Yes Who is it with & Contact Information			Yes or No		
*Title of Grant					
Any notes or comments for Grants Administration					

***If Grant Title Changes Please Notify Grants Administration Immediately!**

COMPLIANCE					
NONE	Just in Time	Protocol #	Approval Date	Expiration Date	Application Number
Animal (list species)	<input type="checkbox"/>				
Human Subjects					
Biological Materials	<input type="checkbox"/>				
Embryonic Stem Cells					
Radiation Safety	<input type="checkbox"/>				
Safety & Environmental					
Select Agents or Toxins	<input type="checkbox"/>				

The following section will allow Arts & Sciences Grants Administration's to put a budget together for your review. Your approval will be required before submitting. If the agency requires the budget on "their" form we will assist you to transfer that information over.

DRAFT BUDGET						
Number of Budget Years					TOTAL AMOUNT REQUESTED	
1	2	3	4	5	\$	
Facilities and Administration Cost Rate					%	
Personnel on the Grant Name	Position or Title		Effort On the Grant Academic Summer Calendar			Amount if known
Detailed Budget Breakdown					Amount Requested	
✓ Lab Supplies						
✓ Travel						
✓ Publications						
✓ Subcontracts						
✓ Tuition						
✓ Subcontract (if applicable)						
✓ Capital Equipment (over \$5,000)						
✓ Consultants						
✓ Other						
✓ Other						
✓ Other						
✓ Other						

COST SHARE / MATCH ***			
Will the Proposal have Cost Share or Match	YES or	NO	
Is Cost Share or Match REQUIRED	YES or	NO	If Yes, what is the %
What is the Amount of Cost Share or Match being requested?			
What FOPAL will cover the Cost Share or Match			

*****All Match and or Cost Share Request must be approved by the Dean. A Cost Share/Match Request Form is available upon request from Arts and Sciences Grants Administration**

COURSE BUY OUT

Will a Course Buy Out be requested for this project?	YES or	NO
Faculty that is requesting the Course Buy Out		
What is the Amount of the Course Buy Out?		
How will the Course Buy Out be covered? Please list the department or FOPAL.		

ANY OTHER BUDGET INFORMATION

The following sections are questions in the Electronic Grant System that is required to be answered with every application. Please read carefully and answer each of the questions

CONFLICT OF INTEREST

1. Currently or during the term of this research study, does any member of the research team and his/her family member have or expect to have:		
a. Do you or your family have any financial interest that could reasonably impact the proposed research or education activity?	Yes or	No
b. Do you or your family have any financial interest in any entity whose financial interest could reasonably impact the proposed research or education activity?	Yes or	No
c. A personal financial interest in or personal financial relationship (including gifts of cash) with an entity that owns or has the right to commercialize a product, process, or technology / studied in this project?	Yes or	No
d. A board membership of any kind or an executive position (paid or unpaid) with the sponsor of this study or with an entity that owns or has the right to commercialize a product, process or technology studied in this project?	Yes or	No
2. Is this submission to a Public Health Service (PHS) agency or PHS FCOI compliant agency? List of PHS		
o If this is a PHS New, Renewal, or Revision, circle Yes and complete this form and upload it in the Attachments section		
o If this is a PHS Continuation, circle NO and no form is required.	Yes or	No
3. Has the University or has a University-related foundation received a cash or in-kind gift for the use or benefit of any member of the research team from an entity that owns or has the right to commercialize a product, process or technology studied in this project?		
	Yes or	No

EXPORT CONTROL

1. Have you signed or been asked to sign a DoD Form 2345 Military Critical Technical Data Agreement related to this project?	Yes or	No
2. Do you anticipate that the project work may involve:		
a. Sending, transporting, transmitting or carrying any material or equipment related to this project outside the US (examples include: GPS, biologicals, diagnostic kits, reagents)	Yes or	No
b. Travel outside the US?		
c. Transmitting funds (through payments, for example) or goods or technology to any of the following countries on the OFAC list	Yes or	No
3. Some types of research may have export control implications even if all work is conducted within the U.S.		
Do you anticipate that the project work may involve		
a. Non-commercial encryption or information security software?	Yes or	No
b. Any equipment technology, materials or software specifically designed modified, or adapted (even slightly) for a military purpose or that may involve national security?	Yes or	No
c. Any Classified materials, equipment, technology or data?	Yes or	No

RESEARCH SECURITY

1. Do any of the following circumstances apply to you	Yes or	No
International collaborations including activities performed outside the United States		
Funding of a Foreign Organization (including sub-award or consultant arrangements) as part of the award		
Foreign resources made available in support of, and related to research efforts, regardless of monetary value. This can include, but is not limited to, laboratory space, travel expenses, training and equipment, etc.		
2. Do any of the following circumstances apply to you:	Yes or	No
Outside appointment(s) with a foreign entity/government (paid and unpaid).		
International visiting scholars, students or collaborators in your facility (even if they are not Key Personnel).		

INTELLECTUAL PROPERTY

If this proposal includes (potential) patents and intellectual property, please contact the Office of Commercialization and Industry Collaboration		
1. Have you discussed any of this research to the Office of Commercialization and Industry Collaborations?	Yes or	No
2. Does the research in this proposal involve any files patents?	Yes or	No
3. Will this research use any biological or physical materials obtained from the third party under a material transfer agreement?	Yes or	No
4. Will this research use any materials obtained from a third party under a transfer agreement granting ownership rights in inventions and/or data out of the use of the material?	Yes or	No
5. Will this research use any materials patented or otherwise, which is owned by the University of South Alabama and currently licensed to a third-party commercial entity?	Yes or	No
6. Is this proposal an SBIR (Small Business Innovation Research Program)?	Yes or	No
7. Is this proposal an STTR (Small Business Technology Transfer Program)?	Yes or	No

Principal Investigator's Signature

Other Information Related to Grant Submission

OTHER REQUIRED INFORMATION & DOCUMENTATIONS NEEDED FOR SUBMISSION	
I give permission to make this abstract publicly accessible. Yes or No	
<input type="checkbox"/>	Please submit Abstract (Can be in Draft Form)
Please submit Budget Justification	

If you have a Subcontract on your Proposal, we must have their Budget and Budget Justification 10 days in advance of the deadline to get the entire budget finalized. Please provide a contact person from that institution.

SUBCONTRACTORS	
If the proposal involves Subcontractors, please add the required documents for each Subcontractor and upload the required item(s) to Proposal Attachment:	
<input type="checkbox"/>	Scope of Work
Budget	
<input type="checkbox"/>	Budget Justification
Subrecipient Form – completed and signed by sub recipient's authorized signing authority	

This document is a “Work in Progress”.
Any and all ideas to make this process work better are welcomed.