

Proposals must be ready to submit a minimum of **5 business days** prior to the deadline. Email completed form to your Grant Officer. If there are multiple PIs (not Co-I), each PI must complete a separate Proposal Approval Form.

Principal Investigator: _____ **School:** _____ **Dept:** _____

Contract Type: 9-Month: ☐ 12-Month: ☐ **Email:** _____ **Extension:** _____ **External Deadline:** _____

Sponsor: _____ **Link to FOA:** _____ **Project Period:** _____ To _____

Project Title: _____

Proposed Effort _____ % Are you requesting course buyout? _____ **NOTE:** If proposal above 12.5% is supplemental income, please contact the Office of Research & Innovation to discuss agency guidelines and course buyout.

Co-PI/Co-I: _____ **Co-PI/Co-I Effort:** _____ % **Co-PI/Co-I School:** _____ **Co-PI/Co-I Dept:** _____

Will the project continue after funding period? Yes ☐ No ☐ If so, estimated cost to Duquesne University? \$ _____

Is this project a subaward? _____ **If YES, who is the prime submitting institution?** _____

What is Duquesne University's portion of the award? \$ _____

Will Duquesne issue a Subaward to another entity with these funds? _____ **Name of Subawardee(s):** _____

Total Request: \$ _____ **Direct Costs:** \$ _____ **Indirect Costs:** \$ _____

Does this project involve any of the following? A "yes" to any of these questions may require further action by prior to submission.

	Yes		Yes
Matching Funds (Pages in the proposal that outline the match _____)	<input type="checkbox"/>	Human Subjects	<input type="checkbox"/>
Cost Sharing (Pages in the proposal that outline the cost share _____)	<input type="checkbox"/>	Laboratory animals	<input type="checkbox"/>
Is there a Conflict of Interest?	<input type="checkbox"/>	Recombinant DNA	<input type="checkbox"/>
Are there foreign collaborators associated with this proposal	<input type="checkbox"/>	Radioactive Materials	<input type="checkbox"/>
Does your research require a BSL2 laboratory and practices?	<input type="checkbox"/>	USDA/CDC Select Agents	<input type="checkbox"/>

Other Support

Investigators must disclose all forms of "other support" both domestic or foreign. When requested, other support is required for all individuals designated in an application as senior/key personnel-those devoting measurable effort to a project.

Certification of Principal Investigator(s), Co-PIs, and Individual Fellowship Applicants:

(1) I (We) certify that the information submitted within this application is true, complete and accurate to the best of my (our) knowledge. (2) I am (We are) aware that any false, fictitious, or fraudulent statements or claims may subject the PI(s) to criminal, civil, or administrative penalties. (3) I (We) agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded as a result of the application. (4) I (We) acknowledge that we have read the University Research policies and will abide by them (<https://www.duq.edu/research/research-conduct.php>) (5) I (We) acknowledge that we have completed the Citi Research Security Training in compliance with the relevant federal agency Research Security Training requirements.

Additional certifications for Individual Fellowship Applicants:

I (we) certify that (1) that the Sponsor will provide appropriate training, adequate facilities, and supervision if a grant is awarded as a result of the application; (2) that the Fellow has read the Ruth L. Kirschstein National Research Service Award Payback and will abide by the Assurance if an award is made; and (3) that the award will not support residency training.

Principal Investigator Date

Fellowship Sponsor Date

Approval of Dean and Department Chair

Deans and Department Chairs certify their review and approval of 1) eligibility of proposed personnel to participate; 2) the commitment of personnel time and effort, space, equipment, and matching funds (if applicable).

Department Chair Date

Dean Date