SPONSORED PROJECTS APPROVAL FORM – ANGELO STATE UNIVERSITY (ASU)

GENERAL PROJECT AND FUNDER INFORMATION

Project Title:

Prime Funding Agency: _____

Pass-through Agency (if applicable): _____

CFDA # (if applicable): _____

Funds Requested: Total $ _____

Proposal Type: _____

If Renewal or Continuation, enter the ASU Fund-Org number(s): _____

If Renewal or Continuation, enter Prior Period (Years): _____

Project Start Date: _____ Project End Date: _____

KEY PERSONNEL INFORMATION AND CERTIFICATION

By signing this form, I/we certify that the proposed project will further the instructional, research, and/or service objectives of ASU in a manner consistent with its status as a non-profit, tax exempt educational institution of the state of Texas. Furthermore, I/we certify that, to my/our best knowledge, no key personnel on this project are debarred by or suspended from receiving funds from the federal/state governments, and that I/we have disclosed any significant financial interests related to this project.

Principal Investigator (PI): _____ **PI Signature:**

Co-PI 1: _____ **Co-PI 1 Signature:**

Co-PI 2: _____ **Co-PI 2 Signature:**

Co-PI 3: _____ **Co-PI 3 Signature:**

Co-PI 4: _____ **Co-PI 4 Signature:**

Co-PI 5: _____ **Co-PI 5 Signature:**

INITIATOR DATA

1) Does this project involve **human research subjects**?

   a) If Yes, select pending committee review or enter protocol number and approval date:

   OR

2) Does this project involve **live animals** in lab, farm/ranch, or wildlife settings?

   a) If Yes, select pending committee review or enter protocol number and approval date:

   OR

3) Does this project involve **recombinant DNA**, microorganisms, biological toxins, blood borne pathogens, human clinical specimens, and/or regulated or particularly hazardous chemicals?

   a) If Yes, select pending committee review or enter protocol number and approval date:

   OR

4) Does this project involve **radioactive material**, Lasers, or radiation-producing material?

5) Do any of the investigators have **significant financial interests** to disclose?

6) Does the project require **subrecipients** or subcontractors?

   a) If Yes, enter name(s): _____

7) Will any faculty receive academic year **release time**?

8) Does the project involve a **new credit course or degree program**?

   a) If Yes, enter course(s)/degree(s): _____

9) Are any of the investigators currently **debarred, suspended, or ineligible** to receive federal funds?

10) Does this project require **cost sharing or matching** funds?

    a) If Yes, notify the Director of Sponsored Projects and complete the Cost Sharing Commitments form.

SUBMISSION INSTRUCTIONS

Submission Deadline (include date & time):

Submission Method: _____

ADMINISTRATIVE APPROVALS

Signatures certify that the proposal is consistent with unit policies and objectives, that unit commitments to the project are noted and approved, that to the knowledge of the signer, no principals on this project are debarred by the federal government, and that any disclosures of significant interests have been reviewed and either no conflicts were identified or conflicts have been or will be managed, reduced to an acceptable level, or eliminated.

Director of Sponsored Projects:

Department Chair:

Dean of College:

Dean, College of Graduate Studies & Research:

Vice President for Finance & Administration:

Provost & Vice President for Academic Affairs:

President (if request >= $500,000):

Other Signatory 1 (if applicable):

Title: _____ **Signature:**

Other Signatory 2 (if applicable):

Title: _____ **Signature:**

Other Signatory 3 (if applicable):

Title: _____ **Signature:**

SPONSORED PROJECT APPROVAL FORM INSTRUCTIONS

General Project and Funder Information

This information will be entered into the Sponsored Projects database. Choose a **project title** that is descriptive of the project, but keep it as brief as possible. The **prime funding agency** should be the original source of the grant funding. The **pass-through agency** is the organization to which ASU is submitting the application if the application is not being submitted directly to the prime funder. Finally, the Catalog of Federal Domestic Assistance number, or **CFDA#**, is an identifier assigned to a particular federal funding program. If the prime funding agency is not a federal entity, leave this item blank.

Key Personnel Information and Certification

List all **investigators** who should receive credit for the proposal or award. All investigators must sign the form to confirm their intent to submit a proposal and to certify their eligibility to submit. If there are more than five investigators, please attach an additional page for their names and signatures.

Initiator Data

1) If human subjects are to be involved in the proposed research, approval is required from the Institutional Review Board (IRB) for Human Subjects Research. Indicate whether approval is pending or, if it has been received, the approved protocol number and date (see OP 56.03).
2) If live animals are to be used in the proposed research, approval is required from the Institutional Animal Care and Use Committee (IACUC). Indicate whether approval is pending or, if it has been received, the approved protocol number and date (see OP 56.06).
3) Research involving recombinant DNA, microorganisms, biological toxins, blood borne pathogens, human clinical specimens, and/or regulated chemicals and particularly hazardous chemicals may require the approval of the Institutional Biosafety Committee (IBC). Indicate whether approval is pending or, if it has been received, the approved protocol number and date.
4) No approval of the project is required if lasers or radioactive materials are involved in the research; however, the work must be reviewed by the University's Radiation Safety Officer and/or the Office of Environmental Health, Safety, and Risk Management.
5) "No" indicates none of the investigators have any significant financial interests to declare. If "Yes" is checked, a plan for managing the conflict or reducing it to an acceptable level must be attached. (See OP 56.08).
6) If subrecipients, subcontractors, or other professional services agreements will be required, the proposal should include evidence that the subrecipient has agreed to do the work for the amount specified in the budget. For proposals to federal agencies, additional certifications may be required.
7) If the project is expected to require faculty release time during the academic year (i.e., September through May), indicate "Yes," and submit a justification and approval for the release time from the department chair.
8) Indicate whether the project requires a new credit course or degree program, and if so, enter the name(s) of the course(s)/degree(s).
9) Indicate whether any of the PI/co-PIs is/are currently debarred, suspended or ineligible to receive federal funds.
10) Indicate whether the project includes any cost sharing commitments from Angelo State University or from a third party. If "Yes" if checked, you must complete and submit a separate Cost Sharing Commitments form.

Please note: Cost sharing commitments should be included **only** if required by the agency and approved by the department providing the cost sharing/matching funds. Do not pad cost-sharing amounts in the hopes that this will make the project more fundable.

Submission Instructions

Enter the submission deadline and the electronic submission method/system (e.g., Grants.gov) through which the proposal must be submitted. If the proposal must be mailed, enter the full mailing address in lieu of electronic submission system information. The Office of Sponsored Projects will be responsible for submitting the proposal via electronic systems or mail/shipping unless otherwise arranged in accordance with OP 56.05.

Administrative Approvals

All proposals must be approved by the appropriate department chair(s) or center director(s). Proposals from units that report to a dean must be approved by the dean. Proposals involving multiple units require multiple approvals. Additional information is available from the Director of Sponsored Projects, Porter Henderson Library Room 203, Phone: 942-2350.

Final Note: Use of Adobe Sign

Unless otherwise arranged with the Director of Sponsored Projects, please use Adobe Sign for signing, routing, and processing this form.