

MERCER UNIVERSITY Proposal Transmittal Form				<u>For Office Use Only</u> 			
INVESTIGATOR DATA							
Principal Investigator/Project Director: Last Name First Name MI							
E-mail Address:							
Department:			School:			Telephone:	
PROJECT INFORMATION							
Title of Project:							
Funding Source:				Branch/Division:			
Sponsor Solicitation No:			CFDA No. (Federal Grants):			NAICS Code (Federal Contracts):	
Due Date: ☐ Receipt Date ☐ Postmark ☐ Electronic Submission <i>The complete proposal needs to be submitted to Sponsored Programs no later than TEN business days before the due date.</i>							
TYPE OF PROPOSAL							
☐ New ☐ Revision/Resubmission ☐ Renewal/Continuation		Please check ALL appropriate boxes ☐ Grant ☐ Sub-contract/Sub-Agreement ☐ Supplement ☐ Contract/Agreement ☐ Preproposal ☐ Fellowship ☐ Application to a Foundation <i>(requires signature from University Advancement prior to submission to ORSP)</i>					
FUNDING PURPOSE							
Research <i>(See last page for definitions)</i> ☐ Basic ☐ Applied ☐ Developmental				Non-Research ☐ Training/Instructional ☐ Public Service ☐ Other			
PERFORMANCE SITE PRIMARY LOCATION							
Location ☐ On-Campus ☐ Off-Campus							
Organization:							
Street:			City:			State:	Zip:
BUDGET DATA							
Estimated Start Date:			Estimated End Date:			Requested Amount:	
Facilities and Administrative (F&A) Costs:			Total Direct Costs			F&A Percent	Total
Project Cost			X			=	
Please submit a detailed budget and budget justification with this form *Enter percent as decimal i.e. .54 for 54%							
Cost Share Requested: ☐ Yes ☐ No			Committed Effort				
☐ University Funds:			Calendar Months	Academic Months	Summer Months	% Effort	
☐ School Funds:							
☐ Department Funds:							
Attach appropriate cost share letter from Provost, Dean, or Department Chair *Enter percent as decimal i.e. .20 for 20%							
☐ Yes ☐ No		Subawards		If Mercer is the Prime Awardee → Does this project include subawards? Please have subrecipient complete a Letter of Consortium. Template can be requested from the Office of Research and Sponsored Programs			
☐ Yes ☐ No		Professional & Technical Services		Any outside consultants?			
☐ Yes ☐ No		Supplemental Pay		Any Intra-University Consulting that is expected to be paid as an Extra Service?			

ALLOCATION OF RESOURCES			
Will this project require additional resources? ☐ Yes ☐ No			
☐ Space ☐ Equipment ☐ Professional/Staff Time ☐ Other Resources			
FINANCIAL CONFLICT OF INTEREST			
☐ Yes	☐ No	Is this a financial collaborative proposal from NIH or NSF?	
☐ Yes	☐ No	Have you, your spouse, domestic partner, or dependent children collectively received any remuneration or equity interest greater than \$5,000 within the last 12 months? e.g. payment for services, consulting fees, honoraria, paid authorship, stock, stock option, or other ownership interest. Please provide the date of most recent disclosure: _____	
☐ Yes	☐ No	Has your Conflict of Interest been mitigated? If Yes, provide date of most recent disclosure: _____	
☐ Yes	☐ No	Have you completed the Collaborative Institutional Training Initiative (CITI) Financial Conflict of Interest training? Most recent training date: _____	
RESEARCH RISK REVIEW			
Does this project involve. . . Please answer <u>ALL</u> questions (A-H) in this section			
☐ Yes	☐ No	A. Human Participants ☐ IRB Protocol Pending OR	Protocol Approval Date: Protocol No.:
☐ Yes	☐ No	B. Live Vertebrate Animals ☐ IACUC Protocol Pending OR	Protocol Approval Date: Protocol No.:
☐ Yes	☐ No	C. Biohazards ☐ Biosafety Protocol Pending OR	Protocol Approval Date: Protocol No.:
☐ Yes	☐ No	D. Radioactive Materials/X-Ray ☐ Radioactive Protocol Pending OR	Protocol Approval Date: Protocol No.:
☐ Yes	☐ No	E. Lasers (Classes 3b or 4)	
☐ Yes	☐ No	F. Recombinant DNA	
☐ Yes	☐ No	G. Particularly Hazardous Chemicals and/or Carcinogens	
☐ Yes	☐ No	H. USDA/HHS Select Agents and Toxins	
ASSURANCES AND DISCLOSURES			
☐ Yes	☐ No	Are you and/or your co-investigators delinquent on any federal debt?	
☐ Yes	☐ No	Are you and/or your co-investigators suspended, debarred, proposed for debarment, declared ineligible or voluntarily excluded from current transactions by any federal department or agency?	
☐ Yes	☐ No	Do you and/or your co-investigators certify that you have not and will not lobby any federal agency on behalf of this award?	
☐ Yes	☐ No	Do you and/or your co-investigators agree to abide by the Mercer Conflict of Interest Policy?	
☐ Yes	☐ No	Do you and/or your co-investigators agree to provide the required progress reports if a grant is awarded?	
☐ Yes	☐ No	Do you and/or your co-investigators agree to be bound by the terms and conditions of the outside grant or contract which supports this proposed activity?	
☐ Yes	☐ No	In consideration of the information and facilities made available to you by Mercer or the outside sponsor, do you and/or your co-investigators agree to assign copyright and patent rights to Mercer University in accordance with the terms and conditions stated in the Faculty Handbook ?	
By signing below, I certify that all information contained above is, to the best of my knowledge, true, complete and accurate. Additionally, I understand that any false, fictitious or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. I assume responsibility for the conduct of this project and in no manner will I knowingly enter into an agreement that will be binding upon the University without the University's written consent. Principal Investigator/Project Director Date The project director/ principal investigator is responsible for circulating the proposal for review and approval as indicated and appropriate in the Department/School/Advancement section below.			

DEPARTMENT/SCHOOL/ADVANCEMENT APPROVAL

I certify that I have reviewed the programmatic aspects of this project and that it is consistent with departmental/school/division objectives. Adequate space, equipment, professional and staff time, and other resources as stated in this application will be made available if the research is approved. The project is recommended for submission to the above agency.

Department Chair Date

Dean/Director Date

The budget and personnel information in the proposal are consistent with all School/College guidelines. The project is recommended for submission to the above agency.

School/College Fiscal Officer Date

For proposals to private, family, community, or corporate foundations. This proposal has been reviewed by University Advancement. The project is recommended for submission to the above agency.

For clinical trials. This proposal has been reviewed by the Director of Mercer Medicine. The project is recommended for submission to the above agency.

University Advancement Date

Director - Mercer Medicine Date

UNIVERSITY APPROVAL (Internal Use Only)

Submit PTF and proposal documents to the Office of Research and Sponsored Programs at least ten (10) working days prior to the sponsor's submission deadline. The ORSP is responsible for obtaining approvals in this section.

I have reviewed the budget information and it is in accordance with applicable cost principles.

Office of Research and Sponsored Programs

Date

I certify that the appropriate committees have reviewed and approved the research protocols contained in this application.

Compliance Office (if applicable)

Date

Health and Safety Office (if applicable)

Date

I certify that I have reviewed the application and that all of the appropriate reviews and signatures have been obtained. The proposal is ready for submission to the above agency.

Wayne C. Glasgow, Ph.D.; Sr. Vice Provost for Research
University Signature Authority or Designee

Date

****NOTE: This page is for information only and does not need to be printed and/or submitted to OSP****

Basic Research: Research undertaken primarily to acquire new knowledge without any particular application or use in mind

Applied Research: Research conducted to gain the knowledge or understanding to meet a specific, recognized need

Developmental Research: The systematic use of the knowledge or understanding gained from research directed toward the production of useful materials, devices, systems, or methods, including the design and development of prototypes and processes