

OCG PROPOSAL FORM

Date received at OCG: _____

Instructions:

Please use this form to initiate the proposal submission process. Complete all portions of the form and submit as early in the proposal development process as possible to the OCG Proposal Analyst. Thank you.

Principal Investigator/department(s): _____

CO-PI's/Departments: _____

DA ICR Split: _____

Receipt/Postmark Deadline: _____

Sponsor/Agency/Program _____

Is this proposal in response to a specific program announcement or solicitation? If so, please provide the announcement or solicitation number: _____

URL for program announcement or solicitation guidelines: _____

Proposed Project Start Date: _____ Proposed Project End Date: _____

Proposal Title: _____

If this is an NSF Fastlane submission, please provide your password. _____

Type of funding:

Grant _____

Subcontract _____ Prime: _____ Sponsor: _____

Contract _____

Location:

On-Campus _____

Off-Campus _____

If there are subcontractors or collaborators, please provide the following information:

Institution: _____ Name: _____ Phone: _____ E-mail: _____

Institution: _____ Name: _____ Phone: _____ E-mail: _____

Institution: _____ Name: _____ Phone: _____ E-mail: _____

Special Mailing Instructions: _____

Is there anything else we need to know to process your proposal successfully? _____

