

Office of Contracts and Grants PROPOSAL PROCESSING FORM

Title of Project Collaborative Research: The Second Phase of Online Laboratories for Science, Technology, and Engineering		Proposal No. 0107.05.0060B	
<input type="checkbox"/> F Sponsor <u>NSF</u>		Received in OCG on 1/3/2007	Deadline 1/10/2007
Begin <u>8/1/2007</u> End <u>7/31/2009</u> OR Duration _____		Total Amount Requested: \$174,672	
PI <u>Mickelson, Alan</u> CoPIs <u>Barnes, Frank</u> <u>Briggs, Derek</u> <u>Sicker, Douglas</u>		Desired <input type="checkbox"/> Receipt <input checked="" type="checkbox"/> Postmark <input type="checkbox"/>	
Title <u>Associate Professor</u>		Type of Proposal	
Phone <u>303-492-7539</u>		Preproposal <input type="checkbox"/>	
Email <u>alan.mickelson@colorado.edu</u>		New <input checked="" type="checkbox"/>	
Box <u>425</u> ICR Split <input checked="" type="checkbox"/> College <u>ENGR</u>		Renewal <input type="checkbox"/>	
Primary Unit <u>Electrical Engr</u> <u>50.000%</u>		Continuation <input type="checkbox"/>	
Other Units <u>Education</u> <u>25.000%</u> <u>Computer Science</u> <u>25.000%</u>		Supplement <input type="checkbox"/>	
Indirect Cost Rate: <u>51.5%</u> <input checked="" type="checkbox"/> On <input type="checkbox"/> Off Campus OF <input checked="" type="checkbox"/> MTDC <input type="checkbox"/> Other _____		Revision <input type="checkbox"/>	
(An Indirect Cost Addendum Form is required for all proposals involving less-than-full indirect cost)		Research <input checked="" type="checkbox"/>	
Ist Budget Period Total Project Period		Training <input type="checkbox"/>	
Direct Cost <u>66,885</u> <u>120,054</u>		Public Svc <input type="checkbox"/>	
Indirect Cost <u>27,236</u> <u>54,618</u>		Other _____ <input type="checkbox"/>	
Total <u>94,121</u> <u>174,672</u>		Grant <input checked="" type="checkbox"/>	
Cost Sharing <input checked="" type="checkbox"/> _____		CR Contract <input type="checkbox"/>	
		FP Contract <input type="checkbox"/>	
		Other _____ <input type="checkbox"/>	

UNIVERSITY COMMITMENTS OR OTHER ASPECTS REQUIRING DOCUMENTATION:

Additional Space/Facilities _____

General Funds/Matching _____ Equip Match Form?

Subcontracts/Consultants _____

AY Support _____

AY Cost Sharing 1% AY effort, Mickelson, Barnes, Briggs, Sicker

Other Cost Sharing _____

Overload/Courseload Reduction _____

Biohazards _____ Radioactive Materials _____

"Select Agents" for information about (and a list of) "select agents" go to CDC website: <http://www.cdc.gov/od/ohs/lrsat.htm>

Human Subjects _____

Animals _____

Other Unusual Aspects _____

PI: Mickelson, Alan

OFFICE OF CONTRACTS AND GRANTS PROPOSAL PROCESSING FORM

PRINCIPAL INVESTIGATOR(S) STATEMENT REGARDING COMPLIANCE WITH GOVERNMENT REGULATIONS AND UNIVERSITY POLICIES

With respect to any inventions made or discovered, or copyrightable material produced in the course of the activities encompassed by this sponsored project proposal application, I agree that my rights and those of any Co-Investigators working on the project shall be controlled by the terms of any resulting award document, and I further agree that I am subject to and will comply with the University Patent Policy, and will make such assignment of rights as is required in the award document or University policy.

I acknowledge that I am aware of, understand, and will conform with all applicable sponsoring agency and University policies regarding misconduct in research and authorship.

I acknowledge that I am aware, understand, and will conform with all campus and University policies and procedures governing conflicts of interest and commitment.

**PI must check one: As the Principal Investigator of this proposal, I affirm that there ARE ___ ARE NOT ___ significant financial interests in, or time commitments to, an outside commercial entity, which relate to my University duties, research, or decision-making on this proposed project.

Please note: if there are such financial interests or time commitments related to the submission of this proposal, then go to http://www.colorado.edu/UCB/Research/ocg/forms/index.html and complete the Significant Financial Interest Disclosure form. Thank you.

**Sign here: Principal Investigator _____ Date _____
Co-Principal Investigator(s) _____ Date _____
Co-Principal Investigator(s) _____ Date _____
Other(s) _____ Date _____

Effective May 10, 2006, NIH no longer requires the signature of the Principal Investigator on applications. NIH has transferred responsibility for securing and retaining the PI's signature to the University as part of our review and approval process.

- **NIH Proposals ONLY:
___ Please check here if this is a proposal to the National Institutes of Health and read and certify to the following:
1. That the information submitted within the applications is true, complete and accurate to the best of my (our) knowledge;
2. That any false, fictitious, or fraudulent statements or claims may subject me (us) to criminal, civil, or administrative penalties; and
3. That 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.

Principal Investigator **NIH proposals only _____ Date _____

Office of Contracts and Grants INDIRECT COST ADDENDUM FORM

Title of Project	Proposal No. <u>0107.05.0060B</u>															
Collaborative Research: The Second Phase of Online Laboratories for Science, Technology, and Engineering	<table border="0" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;"></td> <td style="width:35%; text-align: center; border-bottom: 1px solid black;">1st Budget Period</td> <td style="width:35%; text-align: center; border-bottom: 1px solid black;">Total Project Period</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Direct Cost</td> <td style="text-align: center; border-bottom: 1px solid black;"><u>66,885</u></td> <td style="text-align: center; border-bottom: 1px solid black;"><u>120,054</u></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Indirect Cost</td> <td style="text-align: center; border-bottom: 1px solid black;"><u>27,236</u></td> <td style="text-align: center; border-bottom: 1px solid black;"><u>54,618</u></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Total</td> <td style="text-align: center; border-bottom: 1px solid black;"><u>94,121</u></td> <td style="text-align: center; border-bottom: 1px solid black;"><u>174,672</u></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Cost Sharing</td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>		1st Budget Period	Total Project Period	Direct Cost	<u>66,885</u>	<u>120,054</u>	Indirect Cost	<u>27,236</u>	<u>54,618</u>	Total	<u>94,121</u>	<u>174,672</u>	Cost Sharing		
	1st Budget Period	Total Project Period														
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Indirect Cost	<u>27,236</u>	<u>54,618</u>														
Total	<u>94,121</u>	<u>174,672</u>														
Cost Sharing																
Sponsor <u>NSF</u>																
PI <u>Mickelson, Alan</u>																
Primary Unit <u>Electrical Engr</u>																
Begin <u>8/1/2007</u> End <u>7/31/2009</u> OR Duration _____																

In accordance with CU Indirect Cost Reimbursement Policy, the federally approved indirect cost rates are to be applied to all contracts and grants. Exceptions are rare and must be approved by the Vice Chancellor for Research (or designee). This Addendum Form must accompany the Proposal Processing Form for any such project. The following is applicable to this project:

- 1. By law or regulation a governmental agency is limited in the amount or rate of indirect cost
- 2. A foundation has a formal written policy, consistently applied to all such awards, limiting indirect cost
- 3. A corporation has a formal written policy, consistently applied to all such awards, limiting indirect cost
- 4. The project is of such significant benefit to the campus that subsidization of indirect cost is warranted (if box 4 is checked, approval by the Vice Chancellor for Research or AVCR is required)

Note: For either condition 3 or 4 above, a written justification and explanation of the benefit of the project to the campus must be submitted by the principal investigator/project director (if it can not be adequately described below it must accompany this Addendum Form as an attachment).

OCG calculates the imputed "loss" of indirect cost recovery to be \$ _____
Dollar Amount Details

The following cost items have been included as "direct costs" that may be considered to help offset the "loss" of indirect costs in that the campus, dean, or institute or department also receive benefit:

- 1. AY Salary for the principal investigator/project director _____
- 2. Salary and/or tuition for graduate research assistants _____
- 3. Salary for technical support staff _____
- 4. Departmental administrative support _____
- 5. Equipment, supplies, telephone equipment _____
- 6. Travel or other costs _____

NOTE: It is absolutely essential that any cost items charged to a project be relevant, allocable, and beneficial to that project.

Additional Justification: the following aspects of the project describe the benefit to the campus of such a project and the ways that the "loss" of indirect cost is offset by those benefits (e.g., AY salary recovery, GRA salary and tuition support, seed money for possible future funding, departmental infrastructure costs):

 Endorsement of Department Chair / Institute Director / Dean

University of Colorado at Boulder
Office of Contracts and Grants

Guidelines for Preparing a Request for an Indirect Cost Rate Waiver

May 2006

Please prepare a memo that addresses each of the following questions and forward it to Russell Moore, Associate Vice Chancellor for Research, and Randy Draper, Director of Contracts and Grants.

1. Is the Sponsor a for-profit or non-profit organization?
2. Will the award be a contract or a grant?
3. Is cost sharing required and is a waiver of the indirect/overhead/F&A eligible to be considered cost share?
4. Does the Sponsor have a formal policy limiting the amount of F&A? Is this policy applied consistently? Please provide documentation.
5. Is there a limitation or cap on the funds available for this project from the sponsor?
6. Is cost sharing a specific evaluation criterion?
7. How will the indirect costs to the project be covered? Specifically, will some of the indirect expenses be shifted to direct expenses?
8. Are there any extenuating circumstances that would support a request for a reduction in the IDC rate?
9. What is the purpose of the project?
10. Why is the project important to the University, College, Department, and PI?
11. Is this an on or off campus project? Is the project for research or instruction?

Thank you.

ADDENDUM SHEET FOR COST SHARING/COST MATCHING CU FUNDS

UCB PI/Proj Director: _____
 Proposed Funding Agency: _____

Title of Project:

To be completed by OCG:
 UCB Proposal No.: _____
 Funding / Agency Program: _____
 Mandatory or Voluntary: _____
 What amt or %? _____

Unless required by the sponsoring agency, cost sharing (except for academic year effort) is discouraged and will not be allowed without agreement of the VCR, Dean, and Dept Chair or Institute Director.

Please remember: If eligible mandatory or voluntary cost share expenses have not been spent AND documented by the project end date, the amount of the award may be reduced by the sponsor.

Commitments (check all boxes that apply)	Projected date that funds will be needed (mon & yr) _____		
1) <input type="checkbox"/> University cash sources			
2) <input type="checkbox"/> Equipment match (complete page 2)			
		3) <input type="checkbox"/> Graduate student support (complete page 3)	
	MAXIMUM AMT	% of Total C/S	Speedtype or Source**
Department or Institute	\$ _____	_____ %	_____
Dean	\$ _____	_____ %	_____
Vice Chancellor for Research	\$ _____	_____ %	_____
Other (Specific): _____	\$ _____	_____ %	_____
	\$ _____	_____ %	_____
Total UCB Contribution =	\$ _____		
Funds Requested from Agency +	\$ _____		
Total =	\$ _____		

****Please note: If you are using an auxiliary fund as your source for c/s, you will need sponsor pre-approval to use GAR/GIR as part of your c/s commitment, OR you will need additional cash to cover that expense.**

Separate FOPPS need(s) to be established for any expenses that will be allocated to a cost share commitment so those charges can be easily tracked and verified in the University's financial system.

Commitments (check all boxes that apply)			
4) <input type="checkbox"/> Forfeited F&A (requires pre-approval of sponsor, VCR, Dean & Chair or Director)	\$ _____		
5) <input type="checkbox"/> AY Effort cost share		6) <input type="checkbox"/> Third Party In-kind (complete page 4)	
<input type="checkbox"/> FY Effort cost share		7) <input type="checkbox"/> Non-University cash sources (complete page 5)	
5a) AY or FY: Name: _____	% _____	Life of Award?: Y or N	If "no", dates: _____
5b) AY or FY: Name: _____	% _____	Life of Award?: Y or N	If "no", dates: _____
5c) AY or FY: Name: _____	% _____	Life of Award?: Y or N	If "no", dates: _____
5d) AY or FY: Name: _____	% _____	Life of Award?: Y or N	If "no", dates: _____

In accordance with UCB policy, C/S MUST BE SPENT DURING SAME TIME PERIOD & AT SIMILAR RATE AS THE SPONSORED PROJECT FUNDING See: http://abs.colorado.edu/ABS_WEB/POLICIES/Cost_Share.pdf

Approval Signatures:

PI/Project Director: _____	Date: _____
Dept Chair / Institute Director: _____	Date: _____
Dean: _____	Date: _____
Vice Chancellor for Research: _____	Date: _____

Addendum for Equipment Matching Funds (#2):

Federal programs funding equipment acquisition often require universities to contribute a significant amount toward the purchase price. The purpose of this Addendum is to describe those matching requirements in advance of the submission of a proposal and to define all of UCB's financial agreements and commitments related to that proposal.

The following UCB guidelines are applicable:

- 1) The amount of any UCB contribution must be approved by the VCR, Dean, and Department Chair or Institute Director.
- 2) Equipment matching funds will be approved only for permanent equipment and facilities. The University's contribution will be transferred to a FOPPS used only for these purposes (a "plant fund" FOPPS).
- 3) UCB will provide a match of the purchase price for all major equipment awarded by external funding agencies (i.e., equipment costing more than \$5,000 and with a useful life of more than one year). For details regarding terms of this match see: <http://www.colorado.edu/VCRResearch/downloads/matchpolicy.doc>
- 4) The academic unit involved is generally responsible for all non-acquisition costs.
- 5) If the equipment purchase does not require the entire amount of the University's contribution, the unused funds must be returned to the contributors.

Type of equipment to be purchased (be as specific as possible): _____

Is equivalent equipment available on campus? Explain. _____

Justification or Additional Comments: _____

NOTE: If the Scope of Work for the project is modified after the award has been granted and an amendment is executed changing the equipment requirements and reducing the equipment budget, be sure to contractually reduce UCB's equipment match obligations accordingly.

To facilitate the processing of equipment acquisition proposals for which a UCB contribution is needed, the detailed information on this form must be provided **in advance** of formal proposal processing through the Office of Contracts and Grants (OCG). The **minimum** time required to process a matching request is **five working days** prior to the proposal submission deadline. The matching funds request should include a draft or preliminary budget.

Addendum for Graduate Student Support (#3):

Federal programs providing student support sometimes require universities to contribute toward that support. The purpose of this Addendum is to describe those matching requirements in advance of the submission of a proposal and to define all of UCB's financial agreements and commitments related to that proposal.

The following UCB guidelines are applicable:

- 1) The amount of any UCB contribution must be approved by the VCR, Dean, and Department Chair or Institute Director.
- 2) Matching funds can be used only for approved purposes.
- 3) The maximum amount that UCB will offer as a contribution is the minimum amount required by the funding agency. Rare exceptions to these percentage limits must be approved by the VCR.
- 4) If the amount funded by an agency differs from the original proposed budget, the University's contribution will decrease proportionately.

Type of support requested (e.g., salary, benefits, tuition, stipend, travel, etc) : _____

Number of years in the project: _____

Over what project years will this support be provided?: _____

Justification or Additional Comments (e.g., how the match benefits the teaching and research mission):

To facilitate the processing of proposals for which a UCB contribution is needed, the information on this form must be provided **in advance** of formal proposal processing through the Office of Contracts and Grants (OCG). The **minimum** time required to process a matching request is **five working days** prior to the proposal submission deadline. The matching funds request should include a draft or preliminary budget.

Additional information required for Third Party In-Kind Donors (#6):

This type of cost share applies to donated supplies and/or property or services of an individual(s) contributed by someone outside the University system and the external parties are responsible for attesting to the validity of expenses that cannot be captured by UCB's financial system. These donations shall adhere to the following standards outlined in OMB Circular A-110:

- 1) These contributions are not included as expenses for any other federally-assisted project nor are they paid by the Federal Government under another award (except where authorized by Federal statute to be used for cost sharing or matching), they are allowable under applicable cost principles, and they are provided for in the approved budget.
- 2) Volunteer services provided by individuals may be counted as cost sharing if this is an integral part of an approved project. Rates for volunteer services shall be consistent with those paid for similar work in the recipient's organization or with those paid for similar work in the labor market for the kind of services involved.
- 3) When someone other than the recipient furnishes services of an employee, the services shall be valued at the employee's regular rate of pay (plus a reasonable amount for fringe benefit costs), provided these services are for the same skill for which he/she is normally paid.
- 4) Donated supplies may include such items as expendable equipment, office supplies, lab supplies or workshop & classroom supplies. Value assessed to donated supplies shall be reasonable and shall not exceed the fair market value of the property at the time of the donation.
- 5) The method for determining cost sharing or matching for donated equipment, buildings, and land for which title passes to the recipient may differ according to the purpose of the award
 - a) If the purpose of the award is to assist the recipient in the acquisition of equipment, building or land, the total value of the donated property may be claimed as cost sharing or matching.
 - b) If the purpose of the award is to support activities that require the use of the equipment, building or land, normally only depreciation or use charges for equipment and buildings may be made. However, the full value of equipment or other capital assets and fair rental charges for land may be allowed, provided that the awarding agency has approved the charges.
- 6) Documentation to substantiate any donated supplies or services is the responsibility of the donor and must be retained for at least three years beyond the project end date.

¹A commitment letter from each person or entity should be attached to the proposal. If unavailable at the time the proposal is submitted, these letters must be provided to OCG before a project account can be established.		
Name of Contributor (Individual/Organization)	Describe Contribution ¹	Est. \$ Value

Once the in-kind contribution has been fulfilled, the SPA Cost Share Accountant **MUST** receive **signed** documentation attesting to this fulfillment. This can involve either a **signed, dated letter** from the donor describing the donation, its purpose, and assessed value, OR a **"Third Party Cost Sharing Contributions" form²** completed by each person or entity providing this type of cost share. The form requests a dollar value of the contribution and a signature attesting to said contribution. If the cost share is volunteered time, it is preferred that the person providing that should sign the form, however, a person with signature authority could attest to that or to any other contribution. Be sure to include an explanation of how the dollar amount was obtained, i.e., hourly rate based on current annual salary or hourly consulting rate; depreciated value of donated item, etc. to substantiate the dollar value assigned to the contribution. This cost share commitment will **NOT** be considered fulfilled until such documentation has been received by SPA.

²This certification form can be found at: <http://www.colorado.edu/ocg/forms>

Additional information required for cash from non-University source (#7):

- 1) A commitment letter from each contributor must be attached to the proposal.
- 2) Commitment letters should state when contributions can be expected.
- 3) Generally, grant funds from speed type 130XXXXXX cannot be used to fulfill University cost share commitments without prior approval from the agencies involved.

Name of Contributor:	Source:	\$ Value
Examples:		
The Denver Foundation	Cash Contribution	\$10,000
Anthony & Dorothy Riddle Endowment	Cash Contribution	\$1,600
U of C Federal Credit Union Foundation	Cash Contribution	\$2,000