

**Proposal Transmittal Form (PTF)**  
 Office of Research and Sponsored Programs (ORSP)  
 Eastern Illinois University

**A) SPONSORING AGENCY**  
 (To Whom Proposal Will Be Submitted):

Agency Name: \_\_\_\_\_

Project Dates: Start: \_\_\_\_\_ End: \_\_\_\_\_

Complete Project Title:

Please provide a one to two sentence description of the project:

**B) PRINCIPAL INVESTIGATOR (PI) OR PROJECT DIRECTOR (PD) INFORMATION**  
 (Additional co-PIs or co-PD's should be listed on a separate page)

PI/PD Name \_\_\_\_\_ Department \_\_\_\_\_ Email Address \_\_\_\_\_

CO-PI/PD Name \_\_\_\_\_ Department \_\_\_\_\_ Email Address \_\_\_\_\_

CO-PI/PD Name \_\_\_\_\_ Department \_\_\_\_\_ Email Address \_\_\_\_\_

CO-PI/PD Name \_\_\_\_\_ Department \_\_\_\_\_ Email Address \_\_\_\_\_

**C) BUDGET SUMMARY**  
 (Detailed budget must be included in proposal)

	Direct Cost	Indirect Cost	Total Cost
Amount Requested from Funding Agency			
University Contribution (Cost Share)			
Total Cost of Project			

Grant Accountant \_\_\_\_\_ Date \_\_\_\_\_ **For Office Use Only**  
**F & A (Indirect Costs):** Approved Rate & Base \_\_\_\_\_  
 Not Allowed \_\_\_\_\_

**D) COST SHARE COMMITMENT**

Check as applicable: \_\_\_\_\_ Required Cost Share \_\_\_\_\_ Voluntary Committed Cost Share

Cost Categories	Total Dollar Amount	Source	Account (ORG) Number	Authorized Signature	Date
Release Time (AY/Cal)					
Student Salaries (Undergrad/Grad)					
Other Salaries					
Fringe Benefits					
Equipment					
Materials & Supplies					
Graduate Assistant Tuition Waivers					
Block Graduate Tuition Waivers					
Other					
F&A Waiver					
<b>Total</b>					

Source: C (College); D (Department); M (Central Matching Fund); O (Other, Explain)  
 \*\* The PI/PD certifies that all cost sharing is listed in the table above.

**E) COMPLIANCE**

Will this project involve Human Subjects?  
Is IRB review pending?

Yes No

IRB Protocol # \_\_\_\_\_

Will this project involve Vertebrate Animals?  
Is IACUC review pending?

IACUC Protocol # \_\_\_\_\_

\_\_\_\_\_  
Compliance Coordinator, Research and Sponsored Programs Date

**F) PI'S, CO-PI'S, DEPT CHAIRS AND DEAN(S)/DIRECTOR(S)  
ACKNOWLEDGE AND APPROVE THE FOLLOWING SPECIAL CONSIDERATION(S)**

1. Will this project require additional space or facilities?  2. Will this project require renovation of space or facilities?  (If yes to either question, please give details, Building, room number, etc.)	Yes	No	<b>If Yes for Item 2, the following signatures are required.</b>  _____ Facilities Planning and Mgt. Representative Date  _____ Responsible Unit Date
3. Will this project include Release Time, Buyout Time, or other payment of salary?	Yes	No	If Yes, complete the <a href="#">Grant Workload and Salary Form</a> . Form must be signed by the Chair and Dean and, if applicable, the VP.
4. Is the Responsible Conduct of Research (RCR) Training Completed?	Yes	No	<b>This applies to all federal or federal flow-through research grants.</b> <a href="https://www.citiprogram.org/Default.asp">https://www.citiprogram.org/Default.asp</a>
5. Is the Financial Conflict of Interest training completed and/or form Submitted to ORSP?	Yes	No	<b>NSF and PHS Grants Only</b> <a href="http://eiu.edu/grants/COMP_FCOI.php">http://eiu.edu/grants/COMP_FCOI.php</a>
6. This project will involve purchase of computers.  A. Used for normal productivity only. B. Used for computing, or networking that require human and/or technical resources from ITS.	Yes	No	<b>If Yes to Item 6 B, the following signature is required.</b>  _____ Assistant Vice President for Information Technology Services Date
7. Does this project include courses/workshops to be offered for academic credit through the School of Continuing Education?	Yes	No	<b>If Yes for Item 7, Credit Component approved by:</b>  _____ Dean, School of Continuing Education Date

**G) DEPARTMENT AND COLLEGE APPROVAL**

Each of the signatures in Section G below indicates review and approval of the attached proposal and the items specified in this Proposal Transmittal Form, inclusive. Further, it is hereby certified that the P.I. and Co-P.I. (s) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from current transactions by any federal department or agency, and that the **P.I., Co-P.I. (s), Chair (s) and/or Dean/Director (s) are responsible for adhering to University policies and procedures; accepting responsibility for over expenditures and disallowed costs; ensuring all costs incurred are project related, and in accordance with contractual terms, conditions and time frames, ensuring the technical and reporting requirements of the project are satisfied.**

_____ PI/PD	_____ Date	_____ Department Chairperson	_____ Date	_____ Dean of College	_____ Date
_____ PI/PD	_____ Date	_____ Department Chairperson	_____ Date	_____ Dean of College	_____ Date
_____ PI/PD	_____ Date	_____ Department Chairperson	_____ Date	_____ Dean of College	_____ Date
_____ PI/PD	_____ Date	_____ Department Chairperson	_____ Date	_____ Dean of College	_____ Date

**H) ADMINISTRATIVE APPROVAL**

_____ Director of ORSP	_____ Date	_____ Vice President of Area Submitting Proposal (if applicable)	_____ Date	_____ Vice President for Business Affairs (if applicable)	_____ Date
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