

### GRANT PROPOSAL ROUTING FORM

*This form must be completed, signed, and submitted to Sponsored Research, with your proposal summary, budget & budget justification, required signatures and other information as needed – no fewer than 3 business days before the application deadline.*

APPLICANT INFO								
Applicant Name			Today's Date		Deadline Date			
Applicant Title			Dept.		Start Date		End Date	
Title of Project					Amount Requested <i>(attach <a href="#">budget</a>)</i>			
Funding Agency				Funding Program # or Name <i>(if applicable)</i>				
PROPOSAL TYPE								
		Collaborative <i>(please list institutions)</i>		Check if int'l.	Subcontract <i>(please list institutions)</i>		Check if int'l.	
Preliminary proposal (LOI)		1.			1.			
New proposal		2.			2.			
Resubmission/Renewal		3.			3.			
Is full indirect cost recovered? <i>(64.9% of salaries and wages)</i>		Yes						
		No, sponsor limits or doesn't allow indirect <i>(attach guidelines)</i>						
COMPLIANCE REQUIREMENTS								
YES	NO							
		Are cost share/matching funds required by the funder? If yes, list amount/percentage and proposed source:						
		Is this a federal grant application? If so, please review the Financial Conflict of Interest (FCOI) <a href="#">policy</a> and complete the <a href="#">FCOI report form</a> . <i>Please attach completed form.</i>						
		Does your project engage students or postdocs in research? If so, please acknowledge that you have viewed Barnard's <a href="#">Responsible Conduct of Research (RCR) Policy</a> and will comply with all relevant requirements.						
		Are you seeking PHS/NIH or NSF funding? If yes, please acknowledge that you have reviewed and will comply with Barnard's policy on <a href="#">Scientific Misconduct Allegations, Investigations and Reporting</a> .						
		Does the project involve human subjects? If yes, please contact the Barnard <a href="#">IRB</a> .						
		Does the project involve animals? If yes, see information <a href="#">here</a> about how to contact the Columbia IACUC.						
		Are you conducting life sciences research? If yes, please review Barnard's policy <a href="#">Dual Use Research of Concern</a> .						
		Will any of the research or training be conducted off-campus? If yes, please indicate where:						
		Will you be purchasing any services or goods with complex delivery or timing variables <i>or</i> with costs that exceed \$500? You may need to enter into a contract and should review Barnard's <a href="#">Guide to Contracting</a> .						
COLLEGE RESOURCES AND HIRING (If you answer YES to any of the following, please provide department chair approval via e-mail)								
YES	NO		Indicate new or additional personnel needed each year	Yr1	Yr2	Yr3	Yr4	Yr5
		Is course release or academic year leave requested?	Undergraduate – academic year					
			Undergraduate – summer					
		Is additional equipment required for the project?	Graduate student					
			Post-doc researcher					
			Technician/Other					
		Will additional or renovated office space or facilities be required? If yes, please attach page with details.						

Principal Investigator

Date

Director or Manager, Sponsored Research

Date

Linda A. Bell, Provost and Dean of Faculty

Date