

*This form, regardless of award type or sponsor, must be completed and delivered with a brief project description (abstract or scope of work), a completed Stockton internal budget template, and an RFP, as well as any other supplemental forms requested by ORSP. Please direct any questions to [grants@stockton.edu](mailto:grants@stockton.edu).*

**I. Proposal/Project Information**

**Principal Investigator (PI) Name/Title:** \_\_\_\_\_

**School/Unit:** \_\_\_\_\_

**Co-PI or Co-Director/Co-Investigator (if applicable):** \_\_\_\_\_

**Co-PI or Co-Director/Co-Investigator (if applicable):** \_\_\_\_\_

**Co-PI or Co-Director/Co-Investigator (if applicable):** \_\_\_\_\_

**Partnering Organizations/Institutions (if applicable):** \_\_\_\_\_

**Project Title:** \_\_\_\_\_

**Project Start/End Dates:** \_\_\_\_\_

**Submission Deadline:** \_\_\_\_\_

**Project Purpose**

Research  Capital/Equipment  Training/Prof. Dev.  Public Service  Curricular Development

Scholarships  Community Engagement  Publications  General Operating Support

Student Support/Services  Other

*If Other, please describe:* \_\_\_\_\_

**Submission Type**

New Proposal  Letter of Inquiry/Intent  Subaward  MOU/MOA  Contract  Extension/Renewal

Fee for Services  Other

*If Other, please describe:* \_\_\_\_\_

**Sponsor Type**

Governmental:  Federal  State  Local  Other

*If Other, please describe:* \_\_\_\_\_

Private Sector:  Foundation  Corporation  Bank/Trust  Other

*If Other, please describe:* \_\_\_\_\_

**Name of Sponsor/Funder:** \_\_\_\_\_

**Program (if applicable):** \_\_\_\_\_

## II. Research Compliance

### Research Subjects

Human Subjects  Animal Subjects  Radioisotopes  Proprietary Information  N/A  Other

If Other, please describe: \_\_\_\_\_

### Project/Research Type

Research:  Basic Research  Applied Research  Experimental Development  Other

If Other, please describe: \_\_\_\_\_

### Environmental Impact

Does this project have an actual or potential impact – positive or negative – on the environment?  Yes  No

If yes, please explain: \_\_\_\_\_

### Institutional Review Board (IRB)

*Please note: All research involving human participants conducted by Stockton faculty, administrators, staff, and students, or on its campus, must be conducted in accordance with Federal Regulations and the Multiple Project Assurance filed with the Office for the Protection of Research Risks (OPRR). Surveys that may have sensitive information regarding sexuality, gender, or race should be approved through IRB to protect the participants/targeted audience regardless of assessment or research.*

Does this project require an Application for IRB Protocol Review?  Yes  No

If yes, has the application been submitted and approved?  Yes  No

If no, will the PI submit this for IRB approval prior to award determination?  Yes  No

### IACUC

Does this proposed research involve vertebrate animals?  Yes  No

If yes, please provide the following: IACUC # \_\_\_\_\_ Approval Date \_\_\_\_\_

If no, will the PI submit this for approval prior to award determination?  Yes  No

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## III. Budget, Cost-Sharing/In-Kind Contributions, and Space Requirements

### III-A. Budget

Will the majority of this project take place on-campus or off-campus?  On-Campus  Off-Campus

*Please note: If more than 50% of a project is performed off-campus, the off-campus rate will apply to the entire project.*

*On-campus rate: 70.00%; Off-campus rate: 35.30%.*

Total Direct Costs: \$ \_\_\_\_\_

Total Indirect Costs (Facility & Administrative Costs): \$ \_\_\_\_\_

Indirect Cost Rate: \_\_\_\_\_%

Please consult the **ORSP website** for more information on indirect cost rates for grant and contract submissions. If you have any questions, please contact **grants@stockton.edu**.

Does Sponsor/Funder limit indirect costs?  Yes  No

If yes, what is the allowable %? \_\_\_\_\_

If yes, have the Office of the Provost granted approval?  Yes  No

Total Requested (Direct and Indirect Costs): \$ \_\_\_\_\_

Is completed budget attached/enclosed?  Yes  No

Possible Conflicts of Interest or Finances

Please read **University Procedure 6350** and answer the following question.

Do you have a possible conflict of interest with this submission?:  Yes  No

If yes, please immediately email **grants@stockton.edu** for guidance.

### III-B. Cost-Sharing/In-Kind Contributions

Faculty or staff who request University resources – whether required or not – as in-kind support, course release, or matching funds related to a grant, contract, or sponsored project must complete this section of the form. Include any and all items that are not funded by the sponsor, such as salaries, fringe benefits, unrecovered F&A (Indirect) costs, space renovations and so on.

Are matching funds required by Sponsor/Funder:  Yes  No

Total University funds required: \$ \_\_\_\_\_

Have in-kind contributions been committed?  Yes  No

School/Unit providing in-kind: \_\_\_\_\_

Total in-kind contribution: \$ \_\_\_\_\_

Has other financial support been requested from the University?  Yes  No

If yes, please explain: \_\_\_\_\_

### III-C. Space Requirements

Can the project be conducted within the existing space available to the PI?  Yes  No

If no, please explain: \_\_\_\_\_

If no:

Type of space required:  Office  Classroom(s)  Outdoor Space  New Facility/Construction  Existing Facility

If existing facility, please identify facility: \_\_\_\_\_

Will modification(s) of existing facilities be required?  Yes  No

If yes, please explain: \_\_\_\_\_

**IV. Faculty Release Time**

Release time requested?  Yes  No

Number of Credits: \_\_\_\_\_

Semester of Release: \_\_\_\_\_

Amount requested from Sponsor/Funder for release time: \$ \_\_\_\_\_

Release time pre-approved by Dean?  Yes  No

**V. Approval Signatures**

\_\_\_\_\_  
**Principal Investigator**

\_\_\_\_\_  
**ORSP**

\_\_\_\_\_  
**Dean**

\_\_\_\_\_  
**Academic Affairs**

**VI. FOR ORSP PURPOSES ONLY**

Approval Routing Completion Date: \_\_\_\_\_

Banner #: \_\_\_\_\_

Banner Entry Date: \_\_\_\_\_

Entered by: \_\_\_\_\_

Subrecipient Form Received:  Yes  No