



**INSTRUCTIONS:**

1. Please provide as much of the following information as possible, and all the information outlined in **RED**.
2. **EXTRAMURAL PROPOSALS:** Please email this form to [CON-ORS@arizona.edu](mailto:CON-ORS@arizona.edu) and [preaward@arizona.edu](mailto:preaward@arizona.edu)
3. **INTRAMURAL PROPOSALS:** Please email this form to [CON-ORS@arizona.edu](mailto:CON-ORS@arizona.edu)

<b>PRINCIPAL INVESTIGATOR</b> (Last name, first name)	<b>UA PHONE #</b>	<b>E-MAIL ADDRESS</b>
<b>ADMINISTERING DEPT NAME</b>	<b>ADMINISTERING DEPT #</b>	<b>DEADLINE DATE</b>
<b>TITLE OF PROPOSAL</b>		<b>READY-TO-DEVELOP DATE</b>
<b>PROPOSED START DATE</b> _____ <b>PROPOSED END DATE</b> _____		
<b>TYPE OF PROPOSAL:</b> <input type="checkbox"/> New <input type="checkbox"/> Resubmission* <input type="checkbox"/> Revision* <input type="checkbox"/> Renewal* *Federal ID: _____		
<b>SPONSOR</b> (Funding Agency)		
<b>PROGRAM ANNOUNCEMENT WEB ADDRESS</b>		

**PLEASE DO ALL OF THE FOLLOWING BEFORE SUBMITTING THIS PROPOSAL TO PRE-AWARD:**

- Discuss this project with the Associate Dean for Research (ADR)
- Consult all program directors/faculty/staff involved in proposed project
- Discuss proposed project with your Division Chair
- Arrange for proposal review with the Office of Research & Scholarship
- Include all proposed CON resources (e.g. IT Support Services, OSAA, faculty salary, space, equipment) in the budget
- Consider including graduate assistants and undergraduate students in your budget
- Review draft budget and resources included in the proposal with the ADR
- Get approval from ADR and Dean for resources/other items not included in the budget
- Review final budget with the ADR and get approval for routing (via Pre-Award)

Request assistance with tables. Need student and/or faculty information.  Yes  No

**COST SHARING OR MATCHING FUNDS?**  Yes  No **Source Account(s):** \_\_\_\_\_

**PROJECT LOCATION (select one)**  On Campus  Off Campus (>50% effort at facilities not UA owned/under central lease)

Where will the project be conducted? Bldg \_\_\_\_\_ Room \_\_\_\_\_ Other \_\_\_\_\_

**SUBAWARDS (if applicable):**

Is this an **Incoming** Subaward?  Yes  No

If there are **Outgoing** Subawards, please provide the following:

Organization Name	Site PI Name/Title	Contact Info

**UA INVESTIGATOR EFFORT, ROLE, AND ALLOCATIONS (if known)**

UA Investigator (Last name, First name)	Role (Please select)	% Effort	Credit for Award		F&A Revenue	
			Award Dept. #	% Award Credit	F&A Dept. #	% F&A Distrib

**Please note:** No F&A Waivers will be approved.