

**Baruch College
Internal Approval Cover Sheet for Grant Proposals**

Principal Investigator's Name

Department

Project Title

Submission Deadline

Funding Agency

Project Period

Total Direct Costs

Total F&A (Indirect Costs)

Cost Share Amount

Total Project Budget

Indirect Cost Rate

Fiscal Agent

 Research Foundation BCF Other: _____

DOES THIS PROPOSAL REQUIRE:

- Release Time** Yes No **Semester** _____ **# of Course Reductions** _____
Additional Space Yes No **If yes, what kind** _____
Renovations: Yes No **If yes, what kind** _____
Human Subjects Yes No **If yes, date of IRB Approval** _____
Laboratory Animals Yes No **If yes, date of IACUC Approval** _____
Institutionalization Yes No **(Will the College eventually assume project cost)**
Cost Share: Yes No

Endorsements and Signatures:

As the project director and/or faculty participant, I affirm that I will fulfill the requirements of any grant or contract received as a result of this application.

Principal Investigator/Project Director

Date

By their signatures below the Department Chair and/or the Dean as appropriate affirms that the cost-sharing components incorporated in the proposed project budget reflect an accurate and acceptable contribution to the project, and the Department or School will provide, or arrange to provide, documentation which will meet the needs of the sponsor's auditors for cost sharing commitments.

Signature of Department Chair

Date

Signature of School Dean

Date

SPAR, Director

Date

Provost*

Date

*Signature required for proposals that have recoveries, release time, or facilities and administrative (indirect costs) rate less than 15%