

# MEHARRY MEDICAL COLLEGE GRANT SUBMISSION FORM

**GRANTS MANAGEMENT OFFICE (GMO); WBSC M103; PHONE 6703**

APPLICATIONS TO NIH	SPONSORS OTHER THAN NIH
<p>Complete items 1-21, sign the form (22) and have the chairpersons of all participating departments sign it (23); then save it in your folder on the Carpenter drive. <b>Signatures can be Adobe digital signatures</b>, or get ink signatures, scan the form and save it. When your complete application is on the Carpenter drive and GMO has approved it, GMO will submit it to grants.gov.</p>	<p>Complete items 1-21, sign the form (22) and have the chairpersons of all participating departments sign it (23); then submit it to GMO <b>with one copy of your application</b> and the original face page. GMO will obtain the remaining signatures and submit the application to the sponsor electronically after it's been approved. If it's a paper application, GMO will return the signed application to you for mailing.</p>

- 1) PI's name 2) PI's department
  
- 3) PI's phone 4) Sponsor 5) Sponsor's deadline
  
- 6) Start date 7) End date 8) Year 1 direct costs 9) Total direct costs
  
- 10) Title of proposal
  
- 11) Type of application (check one item in each column)

Type of Application		Source of Funding
Grant	New	Federal
Contract	Supplement	Private
Fellowship	Renewal (competing continuation)	State
	Resubmission	

- | Yes | No |   |
|-----|----|---|
|     |    | 12) Does the project  |
|     |    | 13) Propose to hire new employees?                          |
|     |    | 14) Require renovations or additional space?                |
|     |    | 15) Use vertebrate animals?                                 |
|     |    | 16) Use recombinant DNA?                                    |
|     |    | 17) Use human or animal pathogens?                          |
|     |    | 18) Use human subjects or human biological samples?         |
|     |    | 19) Use carcinogens, toxins, or other hazardous substances? |
|     |    | 20) Use radioactive materials?                              |
|     |    | 21) Require matching funds??                                |

**22) Principal investigator's assurance:** The information in this application is true to the best of my knowledge. The application conforms to the sponsoring agency's guidelines for content and format. I understand that if my project involves vertebrate animals, human subjects, recombinant DNA, or human or animal pathogens, it must be approved by appropriate institutional committees, and that I must conduct the project in accord with their findings. I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded; I also accept responsibility for the financial management of any award that results from this application. If I am seeking funds from the National Science Foundation (NSF) or any component of the Public Health Service (PHS), I certify that neither I, my spouse, nor my dependent children have a Significant Financial Interest (as defined by NSF's Investigator Financial Disclosure Policy [60 FR 35820, July 11, 1995], or PHS's Responsibility of Applicants for Promoting Objectivity in Research for Which PHS Funding is Sought [60 FR 35815, July 11, 1995]) that would reasonably appear to be affected by the research for which funding is sought; and in entities whose financial interests would reasonably appear to be affected by the research.

Principal investigator's signature and date

Co-principal investigator's signature and date

**23) Assurance of chairpersons from all participating departments:** I approve the proposed commitment of time and effort by departmental personnel, the salaries which the application requests for that effort, and the remainder of the requested budget. I approve the use of departmental space and facilities described. The project fits into the general plan for development of this department. The application has been reviewed by a reader other than the PI.

Chairpersons' signatures and dates

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**Grants Management Office ONLY**

22) Date submitted to GMO

**23) Assurance of primary reviewer in GMO:** This application conforms to the guidelines of the sponsoring agency and Meharry. The budget has been correctly computed and conforms to the college's policies for salaries, fringe benefits, indirect costs, and other budgetary matters. The typing and general appearance of the application are satisfactory.

Primary reviewer's signature and date

24) % effort for PI

F & A rate

Yes	No	25) Check each item	Yes	No	26) Type
		Salary recovery		Minority	R      TI
		Contains subcontracts		Alliance	D      TF
		Is a subcontract			I      RR
		PHS			O

27) Control Number