

## Sponsored Program Checklist

**The University of Tampa**  
Office of Sponsored Programs

*Please type to complete this form, following the instructions listed on Page 3.*

### Investigator Data

1. Project Director/Principal Investigator:	2. Phone:
3. Department:	4. E-mail:

### Sponsor/Program Data

5. Sponsor Type: <input type="checkbox"/> Federal <input type="checkbox"/> State of FL <input type="checkbox"/> Private <input type="checkbox"/> Other (Specify):	6. Sponsor's Deadline: Date:                      Time:
7. Sponsor Name:	8. Sponsor Contact (if subaward):
9. Phone:	10. Email:
11. Program Name:	12. Link to Request for Proposals:

### Proposal/Compliance Data

13. Title of Proposal:	14. Project Period:
------------------------	---------------------

15. Proposal Submission: E-mail  Grants.gov/Electronic Submission

<b>16. Proposal Class:</b> <input type="checkbox"/> New <input type="checkbox"/> Amendment	<b>17. Project Type:</b> <input type="checkbox"/> Basic Research <input type="checkbox"/> Programmatic <input type="checkbox"/> Instruction <input type="checkbox"/> Public Service <input type="checkbox"/> Student Support	<b>18. Proposal Type:</b> <input type="checkbox"/> Grant <input type="checkbox"/> Subaward <input type="checkbox"/> Other-Specify	<b>19. Compliance Data (<i>attach copy of approval</i>):</b> Human Subjects:      No      Yes UT IRB Approval:      No      Yes      Pending * Animal Subjects:      No      Yes UT IACUC Approval:      No      Yes      Pending * Radioactive Materials:      No      Yes * Biohazardous Materials:      No      Yes *If you answer yes to any of the starred items please contact OSP at extension 3889 immediately.
--	---	--	--

### Budget Data

Budget Information	20. First or Current Year Budget	21. Entire Project Budget
<b>Sponsor</b>	\$	\$
<b>UT Cost Sharing</b>	Account No:	
<b>Other Support</b>	Name of Contributor:	
<b>Total Costs</b>	\$	\$

22. Course release requested? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please attach detailed justification and approval.	23. Multi-PI F&A distribution? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please attach details.
--	---

**Project Director Endorsements**

**24. University Policy Declarations**

I have read and understand The University of Tampa’s Conflict of Interest and Intellectual Property policies. **Initials** \_\_\_\_\_  
 I have read and understand The University of Tampa’s Sponsored Programs Policy Manual at  
[https://www.ut.edu/uploadedFiles/Academics/Provost/Sponsored\\_Programs/OSPPolicyManual.pdf](https://www.ut.edu/uploadedFiles/Academics/Provost/Sponsored_Programs/OSPPolicyManual.pdf) **Initials** \_\_\_\_\_

**25. Other Certifications**

As the Project Director, Principal Investigator or Co-Investigator of this proposed project, I acknowledge the responsibility associated with my role and agree to comply with the sponsoring agency’s terms and conditions for awards as well as the policies of The University of Tampa. I approve the proposed project’s technical content and budget. I also certify that the information submitted within the application is true, complete and accurate to the best of my knowledge; that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties; and I agree to accept responsibility for the scientific/programmatic conduct of the project and to provide the required progress reports if a grant is awarded as a result of the application.

**Initials** \_\_\_\_\_

<b>26. Key Personnel</b>	<b>Signatures</b>	<b>Department</b>	<b>Date</b>
<b>Project Director/ Principal Investigator</b>	_____ <b>Typed Name:</b>		
<b>Dean</b>	_____ <b>Typed Name:</b>		
<b>Provost</b>	_____ Dr. David Stern	Provost Office	
<b>VP for Admin &amp; Finance</b>	_____ Thomas K. Lafferty	Admin and Finance	
<b>President</b>	_____ Dr. Ronald L. Vaughn	President Office	

**Please attach a summary of the grant and a full proposed budget and return to Office of Sponsored Programs, Plant Hall 226 or [OSP@ut.edu](mailto:OSP@ut.edu).**

**27. Office of Sponsored Program Certification**

The Office of Sponsored Programs hereby certifies that this proposal has met all current university, federal, state and grantor guidelines and has been vetted by the Principle Investigator or lead UT Faculty member’s Dean and by the Provost. By signature, this application is hereby approved by OSP and submitted for further approval to VPAF and President.

**Lorelei Sells, Director of Sponsored Programs** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructions for completing  
Sponsored Program Approval Form**

1. **Project Director/Principal Investigator** - The name of the person who will be responsible for the conduct of the work on the project.
2. **Phone** - Provide the telephone number for the Project Director/Principal Investigator.
3. **Department** - Provide the department name or number where the Project Director/Principal Investigator works and receives mail.
4. **E-mail** - Provide the e-mail address for the Project Director/Principal Investigator.
5. **Sponsor Type** - Check the appropriate box.
6. **Sponsor's Deadline** - Enter the date the proposal is due to the agency. Do not enter arbitrary dates.
7. **Sponsor Name** - Enter the name of the agency to which the proposal is being submitted (i.e., NIH, NSF, Amer. Cancer Society, etc.)
8. **Sponsor Contact** - Provide the contact person's name at the sponsoring agency, if available.
9. **Contact Phone** - Enter the telephone number for the agency's contact person.
10. **E-mail** - Provide the e-mail address for the Agency Contact.
11. **Program Name** - Enter the name of the program to which you are applying (i.e., National Research Service Award, Teacher Quality, etc.)
12. **Link to Request for Proposals** - give the link to the request for proposals to which you are applying
13. **Title of Proposal** - Enter the unique name of the project.
14. **Project Period** - Enter the entire project performance period for which funding is requested in the spaces provided.
15. **Proposal Submission** - Check the appropriate submission type.
16. **Proposal Classification** - Check the appropriate proposal classification box.
  - New* - The proposal has not been submitted by UT before.
  - Amendment* - Adding additional time and money to an existing project.
  
17. **Project Type** - Check the appropriate project type box.
18. **Proposal Type** - Check the appropriate proposal type box.
19. **Compliance Data** - (attach copy of **approval letter**, if available)
  - Human Subjects* - Indicate whether human subjects or data from human subjects will be used in the project. Provide the IRB approval number issued by the Institutional Review Board (IRB). If an IRB approval has not yet been issued, check *pending*.
  - Animal Subjects* - Indicate whether animals will be used in the project. Provide the IACUC approval number issued by the Institutional Animal Review and Use Committee (IACUC). If an IACUC approval has not yet been issued, check *pending*.
  - Radioactive Materials* - Indicate whether or not the project will require use of radioactive materials by checking the appropriate box.
  - Biohazardous Materials* - Indicate whether or not the project will require use of biohazardous materials by checking the appropriate box.
20. **First or Current Year Budget** - Enter the amounts for the current year in the appropriate box on the grid.
  - Agency funds* - should contain to total amount (including indirect costs) being requested from the sponsoring agency.
  - UT Cost Sharing* - the amount indicated in the proposal that UT will provide for the project.
  - Other Support* - indicate any support from sources other than UT or the sponsoring agency. Letters of support with appropriate approval must be included with the proposal.
21. **Entire Project Budget** - Enter the amounts for the current project in the appropriate box on the grid.
22. **Course Release Requested** - Indicate whether or not this application requests release time. If yes, attached justification and approval.
23. **Multi-PI F&A distribution** - Indicate whether multiple PI's plan to share the indirect cost and if yes, provide detail of allocations.
24. **University Policy Declarations** - The UT and agency Conflict of Interest & Intellectual property policies must be read, and any conflict of interest or anticipated intellectual property reported. Additionally, all university policies must be reviewed.
25. **Other Certifications** - The Project Director/Principal Investigator and all co-investigators initial this statement.
26. **Key Personnel Signatures** - The signatures of all key personnel are required, defined as all individuals who contribute in a substantive way to the development or execution of the project. Typically this would include the Project Director/Principal Investigator and any Co-Investigators listed on the face page of the proposal.

Questions regarding this form should be directed to:

Office of Sponsored Programs

Plant Hall 226

(813) 257-3889

[OSP@ut.edu](mailto:OSP@ut.edu)