

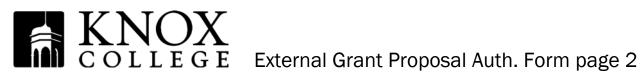
External Grant Proposal Authorization Form

Submittal of this form is required when developing proposals for external funding. This process serves three functions:

- (1) To ensure that financial, facility, technical and other necessary support is committed to your project;
- (2) To ensure that the College remains compliant with funding agency regulations and assurances;
- (3) To ensure that proper internal authorizations are secured to permit submission of a grant proposal on behalf of Knox College.

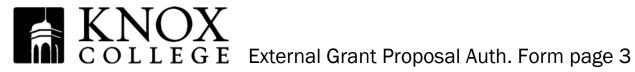
See instructions on page 4, including form deadline information and contacts for assistance.

Knox Grant Seeker(s)/PI(s)
Department/Office/Program:
Phone Number: E-mail: E-mail:
Funding Organization/Agency:
Funding Program (if applicable):
Program/Application URL: [] Postmark [] Received [] Electronic submission
Project (Working) Title: [] Postmark [] Neceived [] Electronic submission
Select all that apply to define the type of proposal:
☐ Inquiry ☐ New Proposal ☐ Renewal ☐ Revision ☐ Subcontract under another applicant
If you are applying as a co-PI or through a subaward or subcontract with another person/agency, indicate name of the
co-PI/Grant Seeker, title, and institutional affiliation:
Budget: Your proposed budget should be submitted along with this form (see instructions, page 4).
* Knox match/cost sharing requires institutional approval.
** Consult with Director of Corporate, Foundation, and Sponsored Research Support for indirect cost rates.
Total project cost:
Amount to be requested from funder:
Does opportunity allow indirect cost requests**? [] no [] yes [] unsure
CASH match*: \$ required \$ voluntary
Source/proposed source?
IN KIND match*: \$ required \$voluntary
Source/proposed source?required \$voluntary
Course, proposed source:



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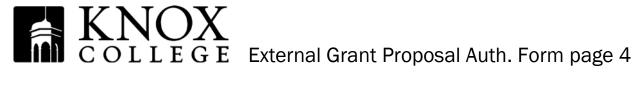
1 01001111011							
Are you requesting funds to supp	oort sab	batical o	or other le	ave/course release time?		□ no	□ yes
Are you requesting funds for sala	ary, stipe	ends or v	wages -fo	or you or others?		□ no	□ yes
Are you requesting funds to supp	oort stud	dent rese	earchers/	assistants?		□ no	□ yes
							,
Equipment, Facilities, Infor	mation	Techn	ology:				
Are you requesting funds for nev	v equipn	nent or i	nstrumen	tation?		□ no	□ yes
Will new equipment or instrume	ntation r	equire a	nnual bu	dgetary support?		□ no	□ yes
Will new equipment or instrume	ntation i	nvolve s	pecial ins	tallation?		□ no	□ yes
Will this involve the need for refu	urbished	or reno	vated spa	ce?		□ no	□ yes
Will you need additional technol	ogy? (co	mputer,	server sp	ace, data storage, etc.)		□ no	□ yes
Will Knox be expected to replace	e/update	e equipm	nent/perip	oherals/software in the fut	ure?	[] no	[] yes
Explain the institutional equipmenecessary, with whom you've sp Research Compliance (see	oken to	secure ii	nternal co	ommitments (Director of Fa			
Are human subjects involved?	□ no	□ yes	\Longrightarrow	IRB approval*?	□ no	□ yes	□ pending
Are animals involved?	□ no	□ yes	\Longrightarrow	IACUC approval*?	□ no	□ yes	□ pending
rDNA , Biohazards?	□ no	□ yes	\Rightarrow	Safety approval**?	□ no	□ yes	□ pending
Radioactive materials?	□ no	□ yes	\Rightarrow	Radiation approval**?	□ no	□ yes	□ pending
NSF - student participants?	□ no	□ yes	\Longrightarrow	Will PI ensure responsib	le cond≀ □ no	uct of res	earch training?
* IRB Chair/IACUC Approval (sig	n/date C	OR attacl	h docume	entation of approval/exemp	otion for	project):	
** Safety/Radiation Officer App	roval (sig	gn/date	OR attach	n documentation of approv	al/exem	ption for	project):



Community Involvement:

Rev. 7/29/2015

•		
Will Pls, project personnel, and/or students be working with minor children (under age 18) project? * (Student Mandatory Reporter Training may be required.)	in the funded I no □ yes	
Will Pls, project personnel, and/or students be conducting any aspect of this project off campus? * (Additional institutional insurance may be necessary.)	no □ yes	
* Please explain:		
Federal Certification Requirements: Is the PI/Grant Seeker debarred, suspended, or otherwise excluded from covered transaction department or agency? (Are you prohibited from receiving federal funding for any reasons the PI/Grant Seeker delinquent on any federal debts? Has anyone lobbied on behalf of this proposal?	on?)	□ yes □ yes □ yes
Are all named participants in compliance with the College's drug-free workplace policy? Is there a potential "significant financial interest" related to this project?	□ no □ no	□ yes □ yes
Signature of PI/PD/Grant Seeker	Date	
Signature of Co- PI/PD/Grant Seeker	Date	
The attached proposal fits the department's program and objectives. Adequate space is a conduct the project. The professional time allotted is realistic and within College guideline.		d to
Signature of Department Chair or Director	Date	
The attached proposal, budget, and supplementary materials (if applicable) have been rew with institutional policies and protocols.	riewed to ensure c	ompliance
Signature of Director of Corporate, Foundation, and Sponsored Research Support	Date	
If the attached proposal involves institutional cash or in kind match, any program delivery activity, matters of institutional matching commitments, Mandatory Reporter Training and insurance requirements have been resolved. I approve submission of the attached propos	or additional inst	
Signature of Vice President for Finance and Administrative Services	 Date	



The attached proposal is consistent with the overall objectives of the College and all institutional concerns are resolved. I authorize submission of the attached proposal.

Signature of President OR Vice President for Academic Affairs/Dean of the College

Date

Instructions:

- 1. Contact the Office of Corporate, Foundation, and Sponsored Research Support as far in advance as possible to discuss your planned proposal.
- 2. Draft your proposal and budget, working with CFSR for assistance if desired.
- 3. Complete this form, obtaining a signature from your Department Chair or Director, and other signatures/approvals as necessary.

Do not obtain the signatures of VPs or the Dean or President at this stage.

- 4. Submit form, proposal draft, and budget to the Director of Corporate, Foundation, and Sponsored Research Support at least two weeks before the proposal submittal deadline.
- 5. The CFSR Director will forward the materials to the appropriate Deans and VPs for review and signature. The CFSR Director will notify you of the decision and provide a copy for your records.

For Assistance and Form Submittal:

Anne-Marie P. Berk

Director of Corporate, Foundation, and Sponsored Research Support

Advancement Office Suite, SMC K-230

Office: (309) 341-7793 Cell: (309) 335-8109

apberk@knox.edu

https://www.knox.edu/offices/academic-affairs/faculty-grants-and-sponsored-research

CFSR Office Use:

Initial contact:
Form received:
Notes: