

## **New Grant Proposal Authorization Form**

Office of Research, Scholarship, & Innovation

Revised October 2024

This form is to notify respective Deans, Department Chairs, Directors, and the Office of Research, Scholarship, and Innovation (ORSI) of intent to submit a proposal. This form should be submitted once a funding opportunity has been identified and at least 10 days prior to the submission deadline following the instructions below. Failure to submit in a timely manner may negatively impact your ability to submit.

ORSI will review the form before seeking approvals. Please email the completed form electronically to mmurphy22@naz.edu. Name: Department: Project Title: CFDA # (if applicable): Funding Agency/Sponsor: Link/Web Announcement: Total Years: Project Start Date: Project End Date: Submission Deadline: Total Award Limit: \$ Total Amount Requested: \$ **Budget Requirements:** Check applicable boxes and provide details in Project Overview Section. Matching funds (cash or in-kind): Detail the source for all matching funds Υ Ν Release time for faculty and/or staff: Explain how courses and workload will be Υ covered Hiring of additional personnel or staff: Details must be included in budget details Υ Ν Is there a commitment by Nazareth University, financial or otherwise, beyond the Υ Ν grant period? Will Nazareth University be partnering with local school districts, other higher Υ Ν education institutions or vendors during the course of the grant period? **Certifications:** Disclosure forms must be attached for all affirmative answers. Is there a potential significant conflict of financial interest related to this Υ Ν project? Will any family members benefit from this proposal, either directly or indirectly? Υ Ν Υ Has anyone lobbied on behalf of this proposal? Ν Does this project involve human subjects research? Does this project involve animal research? Ν Does this project involve rDNA, biohazards, or radioactive materials? Υ Ν

Does this project involve international travel or working with a foreign national?

Υ

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**Project Overview:** Provide an overview of the project.

ORSI will review the form before seeking approvals. Please email the completed for to mmurphy22@naz.edu.	rm electronically
Authorization: *Signature required for grants >\$100,000	
Applicant Signature	Date
Dean / Vice President Signature	Date
ORSI Faculty Director Signature	Date
Provost Academic Affairs Signature*	Date
VP for Finance & Controller Signature	Date
VP Finance & Administration Signature*	Date