**Proposal Preparation Form**

|  |  |
| --- | --- |
| **TYPE OF PROPOSAL**[ ]  NEW PROJECT [ ]  RESUBMISSION [ ]  COMPETING (RENEWAL) [ ]  SUPPLEMENTAL | **PROGRAM TYPE**[ ]  RESEARCH [ ]  FELLOWSHIP [ ]  FACILITIES/EQUIPMENT [ ]  CONFERENCE |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PI Name:** |       | **Proposal Due Date:** |       |  |
| **Title of Project:** |       |  |
| **Project Start:** |       | **Project End:** |       |  |
| **Sponsor/Funding Agency:** |       |  |

What is the Program Number: [ ]  R01 Parent [ ]  R21 Parent [ ]  SBIR/STTR

 [ ]  Specific PAR/RFA:

[ ]  Other:       Mentor (if applicable):

|  |  |  |
| --- | --- | --- |
| Yes | No |  |
| [ ]  | [ ]  | Will the proposal involve **Multiple Principal Investigators**? |
| [ ]  | [ ]  | Will you be including a **Cover Letter** in the proposal? (Review group request or continuous submission only) |
| [ ]  | [ ]  | Will the proposal include any **Subcontractors** outside Penn? |
| [ ]  | [ ]  | Will you be sharing funds working with any other UPenn departments? |
| [ ]  | [ ]  | Will there be an **International Component\*\***?  |
| [ ]  | [ ]  | Will the proposal involve the use of **Human Subjects**? |
| [ ]  | [ ]  | Will the proposal involve the use of **Laboratory Animals**? |
| [ ]  | [ ]  | For NIH only: Will this proposal be using a **Modular** budget? |

Space to be Used- Lab:       Office:       Clinical:

PI %Effort Committed:

Reduction of clinical time: [ ] > 20% [ ] < 20% [ ]  No

Overhead Rate: Choose an item.

Division Chief Approval: Chair Approval:

**AN NIH Document Checklist is available upon request for a list of necessary documents and formatting requirements.**

**Proposal must be in final form and ready for submission 8-10 business days prior to sponsor deadline.**