

Eastern Oregon University GRANT SUBMISSION APPROVAL FORM		Proposal Type (check box)
		Notice/Letter of Intent <input type="checkbox"/>
		Pre-proposal <input type="checkbox"/>
		New Proposal <input type="checkbox"/>
		Sub-grantee <input type="checkbox"/>
		Renewal/Continuation <input type="checkbox"/>
		Supplemental <input type="checkbox"/>
Date Received:	Control #	
Note:		

All applicants must secure institutional approval prior to submission. EOU reserves the right to reject an award or withdraw an application made without approval. **The PI/PD is responsible** for completing this form and obtaining all necessary signatures, prior to submitting the grant application to the agency.

Principal Investigator/Project Director	
Co PI/PD	
Department	
Telephone	
Project Title	
Project Period (From – To)	
Funding Agency	
CFDA No. (sub-grants also)	
Submission Deadline	
Amount Requested from Grant	\$
Indirect Cost Recovery	\$
EOU Cost Sharing or matching funds	Cash = \$ In kind = \$
Partner Cost Sharing or matching funds	Cash = \$ In kind = \$
Total Project Cost (cash + in kind)	\$

Department and University Approvals: By signing this form I am certifying that this proposal is consistent with the mission of the department and the University, and that I am in agreement with the scope of work and project budget.

Reviewer	Signature	Date
Principal Investigator/Project Director		
Department Chair		
Dean of School/Administrative VP		
Executive Vice President & Provost		
Grant Accountant		
VP Finance & Administration		

Please submit this completed and signed form to Cora Beach in Inlow 208. For questions, contact Cora at 962-3981 or cbeach@eou.edu. For budget information on salary and fringe, contact Sue Cain at 962-3515 or scain@eou.edu

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