

Office of Sponsored Programs
Proposal Transmittal Form

The university administration must approve all proposals before submission. The following should be on with OSP before submission, including: 1) this completed PTF, 2) an abstract/statement of work (SOW), and 3) budget and budget justification. Please provide these items at least 7 business days prior to the submission deadline. This form will then be completed by the Principal Investigator (PI) and assigned OSP Coordinator for approval.

INSTRUCTIONS:

1. Principal Investigator (PI) receives the PTF from OSP Coordinator with Parts I & II completed and reviews for accuracy.
2. PI shall complete Parts IV – V and will email the PTF to the OSP Coordinator along with an abstract/SOW, budget, and budget justification.
3. OSP Coordinator shall complete Part III and Part VI is completed through DocuSign.

OSP PRE-AWARD USE ONLY

DATE:	PROPOSAL ID:	COORDINATOR:
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PART I: PI INFORMATION

Principal Investigator:	Email:
Phone:	Lead Department:
If dual appointment, list the department to receive credit:	
PI Dept Head/Director Name:	

PART II: PROJECT INFORMATION

Project Title:	
Sponsor/Agency Name:	
Prime Sponsor (if applicable):	CFDA # (if applicable):
Program Name:	
Start Date:	End Date:
Sponsor Deadline:	
Intended Submission Date:	
If applicable, list the Center or Institute this project will collaborate with:	
UTRGV is the Lead Institution name the Subrecipient Institution(s):	Subrecipient PI Name and Email
Subrecipient Institution 1:	
Subrecipient Institution 2:	
Subrecipient Institution 3:	

PART III: BUDGET INFORMATION

Funding Request		University Cost Share		Third Party Contributions	
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Indirect Cost Rate:

COST SHARE/MATCHING: If Yes, attach a signed Cost Share Form.

THIRD PARTY CONTRIBUTIONS: If Yes, attach letter of commitment from each entity providing a contribution.

PART IV: COMPLIANCE INFORMATION

If the project requires RCR training, the PI certifies to complete the RCR training within the required amount of time indicated by the sponsor.

Select any of the following that apply to the proposed project.

Attach documentation if project requires IRB, IACUC, or IBC.

	Project with human subjects	Protocol #:	
	Project with vertebrate animal subjects	Protocol #:	
	Project with radioactive material/radiation?	Protocol #:	
	Project with biohazards or rDNA?	Protocol #:	

EXPORT CONTROL If answered Yes, additional clearance may be needed from the Research Integrity and Exports Control Officer.

	Project restricts publication, presentation, or disclosure of results or deliverables.
	Project limits or prohibits foreign nationals from performing work or accessing results?
	Visual Compliance conducted on a foreign entity or individual results raised concern(s)?
	Project will require a nondisclosure agreement or confidentiality obligations?
	Project will include equipment, software, or technical data that is on the United States Munitions List (USML) or Commerce Control List (CCL)?
	Project involves the use of controlled substances and/or alcohol as part of the research?

PART V: PROJECT PERSONNEL Signatures are required from those listed as PI & CoPIs in Part VI.

Project Credit will impact IDC Return Distribution and College/Department activity Credit.

Summer Effort cannot exceed 3 months, NSF restricts to 2 months total on all NSF awards.

PERSON	EMPLOYEE TYPE	ROLE	PROJECT CREDIT (= TO 100%)
PI NAME:			%
DEPARTMENT:			
NAME:			%
DEPARTMENT:			
NAME:			%
DEPARTMENT:			
NAME:			%
DEPARTMENT:			
NAME:			%
DEPARTMENT:			

PART VI: CERTIFICATION & APPROVALS

INVESTIGATOR CERTIFICATIONS: My signature certifies the following:

1. The information contained on this form and the corresponding proposal is true, complete and provides an accurate representation of this project and needed resources. I may be subject to criminal, civil, or administrative penalties if I have any false, fictitious, or fraudulent statements or claims.
2. The submission of this form without an accompanying Cost Share Form indicates that all necessary resources are included in the proposal and supporting documents and that I do not expect the University to share in any additional expenses.
3. If the project is funded, I will accept responsibility for the scientific conduct of the project and will administer the project in accordance with the terms and conditions of the grant or contract including the fulfillment of reporting requirements indicated by the funding agency. I will abide by all relevant university policies, including its research, conflict of interest, research integrity, intellectual property, copyright, and Drug Free workplace policy.
4. I am not delinquent on any Federal debt (taxes, student loans, etc.)
5. I am not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from current transactions by any Federal department or agency.
6. I have not and will not lobby any Federal agency on behalf of this award.
7. All financial interests and relationships to any entity involved or connected with this project have been disclosed as required by university policy.
8. I agree to the indicated split of project credit.

*UTRGV, OSP has adopted the use of THECB Standards & Accounting Methods to determine if sponsored project is restricted research.

DEPARTMENT CHAIRS, DIRECTORS, AND DEANS: I certify that the project is consistent with the department/unit/college and university mission. I approve of the department/unit/college effort and resources that will be used and adequate facilities and space will be provided for the project, and faculty and other personnel can be committed to the project as described in the proposal.		
Principal Investigator	Dept Head/Director	Dean/Administrative/Division Head
Investigator	Dept Head/Director	Dean/Administrative/Division Head
Investigator	Dept Head/Director	Dean/Administrative/Division Head
Investigator	Dept Head/Director	Dean/Administrative/Division Head
Investigator	Dept Head/Director	Dean/Administrative/Division Head
ENDORSEMENTS:		
I confirm the collaboration on behalf of the Center or Institute: Center Director	I approve the submission of this proposal to the designated Corporation/Foundation/Organization. Kelly Nassour EVP for Institutional Advancement	I certify that the proposal conforms to funding agency requirements and appears to be a complete and accurate presentation of the project. The budget is accurate and conforms to university policies. Ruth V. Lozano Executive Director of Research Administration
APPROVALS: I approve the submission of this proposal to the designated funding agency.		
Dr. Thomas Spencer Associate VP for Research Operations		