

AUTHORIZATION TO SUBMIT

Pepperdine University • Office of Research and Sponsored Programs • TAC-336 • 310.506.4819 • Fax: 310.506.7233 • rspinfo@pepperdine.edu

To Ensure Appropriate Internal Review and On-Time Delivery, the Proposal and Signed Authorization Form are due in the Office of Research and Sponsored Programs Five (5) Working Days Prior to the Agency Deadline

RSP 1/2010

Project Director _____ **Title** _____

School/Unit: _____ **Division/Dept:** _____

Phone: _____ **Campus Address:** _____ **Mail Code:** _____ **Email:** _____

Proposal Title: _____

Funding Agency: _____

Submission Phone#: _____ **Submission Email:** _____

Submission Name: _____

Submission Address: _____

Deadline Date: _____ **Project Period:** _____ **Delivery Method** _____

Project Description _____

Purpose [] **Type** [] **Source** [] **Category** []

Involves (check all that apply):

Humans, Study# _____ Approval Date _____ **Grant Type** []

Animals, Study# _____ Approval Date _____ Hazardous Agents, Study# _____ Approval Date _____

rDNA, Study# _____ Approval Date _____ Radioactive Materials, Study# _____ Approval Date _____

Released/Reassigned Time/Source _____ New Space, Special Facilities, or Renovation/Source: _____

Budget Information:

Direct Costs: _____ Cash Match (Required)/Source: _____ Amount: _____

F&A Costs: _____ Rate: _____ Cash Match (Voluntary)/Source: _____ Amount: _____

Requested Amount: _____ In-Kind Cost Share (Required)/Source: _____ Value: _____

Project Director's % of Effort _____ In-Kind Cost Share (Voluntary)/Source: _____ Value: _____

The Project Director/Solicitor affirms that to the best of his/her knowledge: 1) the information submitted within the application is true, complete and accurate; 2) that any false, fictitious, or fraudulent statements or claims may subject him/her to criminal, civil, or administrative penalties; 3) that he/she agrees to accept responsibility for the conduct of the project and to provide the required progress reports if a grant is awarded as a result of the application; 4) no federal funds have been or will be used to lobby any member or employee of Congress or employee of any federal agency in connection with the proposal; and 5) the necessary disclosures under the University's conflict of interest policy have been made.

Project Director _____ Date _____ Solicitor _____ Date _____

Authorizing Signatures: (Division/Department Chair and Dean/Director signatures indicate assumption of responsibility for resources committed in proposals, e.g., personnel, space, equipment, etc.)

Division/Department Chair _____ Date _____ Associate Provost for Research _____ Date _____

Dean/Director _____ Date _____ Director, Research & Sponsored Programs _____ Date _____

Dean of Admission & Enrollment Management _____ Date _____ Vice President for Advancement & Public Affairs _____ Date _____

Director, Corporate & Foundation Relations _____ Date _____ Provost _____ Date _____

Chief Financial Officer _____ Date _____ President _____ Date _____

Administrative Use Only: Proposal # _____ Submit Date _____ Received by: _____ Date: _____ Time: _____

Letter of Intent Pre-proposal Proposal Continuation of Proposal #: _____ Continuation of Project#: _____