

**Bellarmino University
Pre-grant application form**

Approval from the Sr. VPAA is required before writing a direct or a sub grant proposal. To obtain approval to proceed, complete the step one fields below, attach the required information, obtain signature of dean, and submit to Beth Davis, Academic Affairs (x 8092).

Step One - supply preliminary information

Proposal Title:	
Principal Investigator(s):	Campus Phone:
Department:	
GRANT INFORMATION:	
Granting Source:	Deadline:
Attach 1-2 paragraphs that briefly describe how the purpose and objective of this proposal supports or enhances the following:	
a) Your professional development and departmental goals and priorities:	
b) Institutional goals and priorities (i.e., applications of technology to learning, interdisciplinary course design, etc.):	
c) Describe how outcomes will be assessed:	
Total Grant Amount: \$	Length of Grant:
Principal Investigator Signature:	DATE:
Dean/Area V.P. Approval:	DATE:
This pre-grant application has been reviewed by the Dean's Council and the Principal Investigator has approval to proceed.	
Director of Academic Operations:	DATE:

Step Two - submit final proposal for approval

Are there any existing internal sources of funding for this grant/proposal <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please identify source and funding level or suggestions for resource reallocation:	
Anticipated institutional resources (space, equipment, personnel, money, etc.):	
Attach application guidelines and final proposal documents.	
Project Involves: <input type="checkbox"/> Yes <input type="checkbox"/> No Human Subjects (IRB approval required)* <input type="checkbox"/> Yes <input type="checkbox"/> No Animal Subjects (AC&UC approval required)* <input type="checkbox"/> Yes <input type="checkbox"/> No Biohazards (IBC approval required)* <input type="checkbox"/> Yes <input type="checkbox"/> No Faculty Release/Salary Recovery* <small>* For each yes, the appropriate approval will need to be obtained and attached with the final grant proposal.</small>	Sponsor Type: <input type="checkbox"/> Federal Government <input type="checkbox"/> State/Local Government <input type="checkbox"/> Public Corp/Foundation <input type="checkbox"/> Private Corp/Foundation <input type="checkbox"/> International
Federal CFDA#: _____	
If Non-Fed Sponsor, did the sponsor obtain any of THEIR funding from federal sources? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Information obtained from _____	
CONFLICT OF INTEREST DISCLOSURE:	
I have read <u>and</u> understand the BU Conflict of Interest Policy located at http://www.bellarmino.edu/documents/FacultyCouncil/ConflictsOfInterest12106.doc <input type="checkbox"/> Yes <input type="checkbox"/> No	
I, my spouse, and/or my dependants _____ do have _____ do not have <u>significant financial interests</u> which require disclosure according to the BU policy. If you do have, please list and attach required information.	
I am aware that as a condition of employment under this grant, that I must abide by the BU Drug-Free Policy, and notify my supervisor of any conviction for a violation of any drug statutes occurring in the workplace no later than 5 days after such conviction. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Will any other BU faculty, staff, or students be working on this sponsored project with you? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, attach a complete list so each person may be contacted by BU Administration about the Conflict of Interest Policy.	
I agree to update any necessary disclosure during the period of the award, on an annual basis, or as new significant financial interests are obtained; and to cooperate in the development of any plan, which would constitute a Conflict of Interest Resolution Plan, if necessitated by a violation of this policy. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Final grant proposal documents have been reviewed and have approval to proceed.	
Sr. V. P. Academic Affairs: _____	DATE: _____
V. P. Admin. and Finance _____	DATE: _____