

American University of Beirut
Office of Grants and Contracts
Proposal Transmittal & Approval Form
(For all External Grant Proposals Except LNCSR)

OGC USE ONLY

Proposal Number _____

Date Logged _____

1. Principal Investigator _____

Faculty : _____ Department : _____

Title / position : _____

Phone: _____ ext. : _____

E-mail: _____

5. Co-Principal Investigator _____

Faculty : _____ Department : _____

Co-Principal Investigator _____

Faculty : _____ Department : _____

2. Project Title:

Deadline for Submission : _____

6. Percentage Effort of PI on Proposed Project: %

3. Project Type:

- Research
- Training
- Clinical Trial
- Conference / Workshop
- Technical Testing
- Subcontract
- Other (Specify) _____

7. Proposal Type:

- New Project
- Renewal
- Transfer
- Other, specify

8. Proposed Start Date: ____/____/____
(mm/dd/yy)

Proposed End Date: ____/____/____
(mm/dd/yy)

4. Funds Requested: _____

Direct Costs : _____

Indirect Costs : _____

Total Cost Sharing (If Applicable): _____

Cost Sharing Distribution Other than Academic Contribution Effort:

\$ _____ from Campus/ Central Administration

\$ _____ from Faculty

\$ _____ From Department

\$ _____ from other campus sources

*You must have authorization from your Department Chair in the form of an e-mail or letter that conveys the following: your home department; the project title and sponsor; the amount to be cost shared or matched; the University account to which the cost shared expense will be charged. We must have this authorization prior to signing the proposal

9. Funding Agency/ Sponsor : _____

Address and Fax: _____

Contact Name & Title: _____

Phone/fax & Email : _____

10. Mailing Instructions:

- OGC to Mail Original & ____ copies as supplied (by regular mail or Aramex; allow 3-4 days for Delivery)
- Department to Mail , Person to call for pick up:

Phone ext.: _____

Regulatory and Other Approvals

11. Does this proposal contain any information which is:

a- Patentable, Confidential, Copyrightable, Proprietary? Yes No
If yes, please indicate where this information is located in the proposal.

b- Will this project involve intellectual property in which the University may own or have an interest? Yes No

12. Is additional space needed?

Yes No

13. Equipment and/or Facilities included in this proposal?

Yes No

14. Will the Proposed Research Include :

a. Human Subjects Yes No
If yes , please attach the IRB approval or the request for approval

b. Animal Subjects Yes No
If yes , please attach the IACUC approval or the request for approval

c. The Use of Radioactive Materials Yes No
If yes, please attach the University Radioactive Committee approval or the request for approval

d. The Use of potentially infectious agents including human blood or tissues (carcinogens, or mutagens or others) Yes No
If yes, send abstract of proposal to Biosafety Officer at AUB

15. Is construction or renovation included in this proposal?

Yes No

For construction and renovation an approval letter from the Dean and/or Provost is needed

Remarks or Special Instructions:

SIGNATURES

PRINCIPAL INVESTIGATOR RESPONSIBILITY: It is understood that if an award results from this application, the principal investigator will perform the scientific, technical, and administrative duties normally associated with the project including the provision of required technical reports. The principal investigator assures that he/she makes this submission with the understanding that any resulting award will contain no provision restricting the University's right to publish research results, and that if any question of such restriction arises in subsequent negotiation he/she will assist in arranging the further review that will be required. It is also understood that if an award is granted, the Principal Investigator will administer it in accordance with the policies of the funding agency and the University. The principal investigator will be held responsible for not complying with the funding agency's regulations on budget expenditures.

Principal Investigator Signature & Date

Department Chairperson: The attached application is approved. It is within the total program and academic objectives of the Department. Adequate space is available or planned for conduct of the project. The professional time allocations described therein are realistic. If matching funds/cost sharing is required as a condition of an award resulting from this proposal, I will be responsible for assuring that the necessary resources are made available. The information contained on the Proposal Transmittal Form is accurate and correct to the best of my knowledge.

Department Chair Signature & Date

Dean of Faculty/School (or Designee): The proposed project is approved. It is consistent with the total program objectives of this faculty/school and the commitments for this project, including required matching funds/cost sharing, additional space or renovation needed, or equipment are acceptable.

Dean of Faculty Signature & Date

Office of Grants & Contracts: The budget and administrative information contained on this Transmittal Form and the attached proposal is complete and accurate to the best of the OGC's knowledge. If an award is made as a result of this proposal, the OGC will administer it in accordance with the policies of the sponsor and the University.

Director of OGC Signature & Date

Office of the Provost

Provost, Signature & Date

INSTRUCTIONS FOR PROPOSAL TRANSMITTAL & APPROVAL FORM

The Principal Investigator is responsible for completing and signing the **Transmittal and Approval Form**. By signing the form, the investigator affirms that the information contained in the proposal and on the form is accurate and complete. Once the proposal is approved and the Transmittal and Approval Form signed by the Department Chairperson, and Dean of Faculty, the original proposal and transmittal form, together with needed number of proposal copies as requested by sponsor agency should be delivered to the Office of Grants and Contracts for University approval and signature.

1. PRINCIPAL INVESTIGATOR: Full Name of PI

FACULTY: Indicate the faculty in which the PI belongs to

DEPARTMENT: Indicate the department in which the PI has his/her primary appointment

TITLE/POSITION: Indicate the department in which the PI's academic rank (Professor, Associate Professor, Assistant Professor..)

PHONE: Mobile number or Home phone number (Optional)

Ext: Local Campus Extension

E-MAIL: Indicate the AUB e-mail or the one that is often accessed

2. PROJECT TITLE: The title in this cell must be the same as the one on the proposal. OGC will reference the title when transmitting the proposal to the funding agency.

DEADLINE FOR SUBMISSION: Indicate the Funding Agency's deadline for receiving the proposal, include the time if applicable.

3. PROJECT TYPE: Check the appropriate box(es) using the following definitions:

Research: Includes projects that involve research and are under the supervision of a PI with academic rank of Assistant Professor or higher (or equivalent).

Training: Includes projects that involve training courses or workshops in a specified field, or projects that involve new or expanded university curricula, teaching programs, general education support program.

Clinical Trial: Includes programs which are investigations and tests of the effects of drugs and medical treatments on patients and are sponsored by private sponsor (industry) or pharmaceutical company.

Conference/ Workshop: Includes programs which are entirely for support of a conference or a workshop.

Technical Testing: Includes research programs directed towards the industry (mostly initiated by industry).

Subcontract: Includes research projects subcontracted from another institution or research projects subcontracted by AUB to another institution.

Other: Include anything not identifiable in the above.

4. FUNDS REQUESTED: Enter the total amount requested from the funding agency including both direct and indirect costs.

Direct Costs: Enter the total budget for the direct costs

Overhead Charges (Indirect Costs): Enter the total budget and percentage for the indirect costs

Total Cost Sharing: If cost sharing is proposed, indicate the total amount and indicate the source(s). Authorization from the Department Chair in the form of an e-mail or letter that conveys the following; your home department; the project title and sponsor; the amount to be cost shared or matched; the University account to which the cost shared expense will be charged is needed. We must have this authorization prior to signing the proposal. If cost sharing is not proposed at all please insert: N/A (not applicable)

5. CO-PRINCIPAL INVESTIGATOR: Full name of Co-PI (if Applicable)

FACULTY: Indicate the faculty in which the Co-PI belongs to.

DEPARTMENT: Indicate the department in which the CO- PI has his/her primary appointment.

6. PERCENTAGE EFFORT OF PI ON PROPOSED PROJECT: Please indicate the percentage of time you will be working on the project for the duration of the project.

7. PROPOSAL TYPE: Check the appropriate boxes using the following:

“New” box; if it is a new project and it is the first time you submit the proposal

“Renewal” box; if you are asking for a renewal of an ongoing project with the request for an additional budget.

“Transfer” box, if grant is being transferred to AUB from another institution

8. PROPOSED START DATE: Self-Explanatory

PROPOSED END DATE: Self –Explanatory

9. FUNDING AGENCY/SPONSOR: Include the full name, address and fax number of the funding agency to which the proposal is being submitted. Also please include the contact's name, title and telephone. This agency address and contact name will be used to send the proposal to, or needs to negotiate the terms and conditions.

10. **MAILING INSTRUCTIONS:** As needed, OGC will mail the proposal via regular mail or via courier (Aramex) to the funding agency listed in #9 as long as the proposal is approved and signed by the key persons. OGC will not send proposals by overnight delivery and will not guarantee delivery by the sponsor's deadline.

11. **PATENTS, COPYRIGHTS, INTELLECTUAL PROPERTY (IP):** Indicate if the project might yield a patent, or if there will be any IP or copyrights issue that have to be addressed in the contract.

12. **ADDITIONAL SPACE:** Indicate if additional space is needed to carry out the proposed project or needed for requested equipments.

13. **EQUIPMENT AND/OR FACILITIES:** Indicate if equipment or facilities are included in the proposal.

14. **INSTITUTIONAL RESEARCH COMMITTEES APPROVAL:** Indicate whether the proposal includes human subjects, use of animals, use of radioactive materials, and/or use of biohazard material. If any of the above mentioned are indicated, approval from the appropriate committee must be obtained in advance of the grant funding. In any case all the forms and applications (and approval if available) must accompany the proposal.

a. For the use of human subjects and application to the IRB, faculty members should follow IRB's principles and procedures which can be found under the Faculty of Medicine Research website: <http://staff.aub.edu.lb/~webmedic/submission.htm>.

b. For animal use and application to the Animal Care and Use Committee (IACUC), faculty members should follow IACUC's principles and procedures and obtain their approval see the following website: <http://staff.aub.edu.lb/~webmedic/IACUC.htm>.

c. For the use of radioactive material, faculty must apply for a license and submit it to the Health Physics Services see the following website: <http://staff.aub.edu.lb/~webhsc/healthphysics/licence.htm>

d. For the use of infectious agents faculty members must submit an abstract of the proposal to the Biosafety Officer at the Department of Environmental Health, Safety and Risk Management.

15. **CONSTRUCTION OR RENOVATION:** Indicate if the proposal includes or requires any construction or renovation. If this was the case, an approval letter from the Dean and Provost needs to be attached to this form. OGC will not process the proposal before receipt of letter.