## Application Transmittal Form

**PROJECT INFORMATION**

Principal Investigator: ________________________________

Department: __________________ Phone: ______ Email: ______

Project Title: ____________________

Sponsor: __________________

RFA or RFP#: __________ Date Due to Sponsor: ______________ Postmark [ ] Arrive [ ]

**TYPE OF APPLICATION**

- [ ] New
- [ ] Renewal
- [ ] Supplement
- [ ] Continuation

**TYPE OF ACTIVITY**

- [ ] Grant
- [ ] Contract
- [ ] Subcontract/Subaward

**PURPOSE OF APPLICATION**

- [ ] Research
- [ ] Education/Training
- [ ] Public Service
- [ ] Program Development

**BUDGETED SUBCONTRACTORS**

- [ ] Yes
- [ ] No

Name ____________________

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**FUNDING**

Project Period

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<th>To</th>
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Direct _________ Indirect _________ Total $ _________ -

Indirect Cost Rate 63% of Base $

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**SAFETY REVIEW**

Human Subjects Involved? [ ] Yes [ ] No

Animal Research? [ ] Yes [ ] No

Biohazard Hazard? [ ] Yes [ ] No

Radiation Hazard? [ ] Yes [ ] No

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**In Kind Support:**

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**Salary/Leave Issues:**

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**Space / Sustainability Issues:**

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CERTIFICATIONS

1. The Principal Investigator(s) agree to accept responsibility for the conduct of the project and to provide required progress reports if a grant/contract is awarded. The Principal Investigator(s) also agree that the scientific portion of the application, to the best of their knowledge, is original and contains no false, fictitious, or fraudulent statements of data.

2. We certify that this application has requirements for space and resources that can be met by our institution, and that arrangements have been made to meet these needs.

3. We certify that the equipment requested on this application are not reasonably available to the Principal Investigator(s).

4. We certify that we have no relationship with the sponsor or other entity that would constitute a real or potential Conflict of Interest.

5. To the best of our ability and based on current information, we certify that the content herein, including the time distribution of research effort, is complete and accurate. The proposed budget reflects this certification.

6. We certify that the use, if any, of any human subjects has been approved by Hamilton College or is pending review by the Institutional Review Board (IRB).

If the funding source of this proposal is Federal, I/we certify that:

i) I/we are not delinquent on any Federal debt

ii) I/we are not debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency.

iii) I/we will promptly disclose any invention made under a federally-funded grant or contract, and will cooperate in the filing of all papers necessary for patent applications to establish the government's right in such inventions.

iv) No funds have been paid or will be paid, by or on behalf of me/us, to any person for influencing or attempting to influence any officer or employee or any agency, a Member of Congress, any officer or employee of Congress in connection with the awarding this project.

APPROVALS:

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<thead>
<tr>
<th>Typied Name</th>
<th>Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Principal Investigator</td>
<td></td>
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<tr>
<td>Faculty Investigator</td>
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<tr>
<td>Faculty Investigator</td>
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<td></td>
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<tr>
<td>Department Chair</td>
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If personnel or resources from other departments are required, the following approvals are required:

<table>
<thead>
<tr>
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I have reviewed this proposal and the financial details and certifications are correct and acceptable

Director, Office of Sponsored Programs

Jeffrey Ritchie

Institutional Approval

Associate Dean