***Complete this form at least FOUR weeks prior to the proposal submission date.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EXTERNAL FUNDING**  **PRE-APPROVAL FORM** | | | | |
| This form is for faculty and staff who wish to seek external funding for research or project support. It will be used to notify internal stakeholders about your plans to seek funds. **Please complete then route to Cyndi Weingard (**[**cweingard@samuelmerritt.edu**](mailto:cweingard@samuelmerritt.edu%20) **) who will obtain approver signatures via DocuSign.** If you have questions, please call her at 510-879-3343. | | | | |
| **Principal Investigator or Project Director:** | **Department:**  **College:** | | **Phone:** | **Date:** |
| **Project Name:** | | | | |
| **Brief Description of the Project:**  *If applicable, complete attached Appendix A (Checklist for SMU Resources and Compliance Considerations)* | | | | |
| Total direct costs of project, including major budget items (complete attached budget template):  Outside funding needed:  Proposed timetable:  Is Pl requesting release time? | | | | |
| RFP or name of prospective source(s) of funding:  Due date for proposal: Planned submission date: Amount Requesting: $  Are you applying for federal funds, either directly or as a sub-recipient through another organization?  If so, a federal procurement policy may apply.  Does funder require SMU to allocate matching funds or cost sharing?  If yes, please describe the requirement:  Is Pl requesting institutional support (e.g., in-kind, overhead)? If so, please list:  Will outside source fund overhead expenses, and, if so, describe any limitations: | | | | | | |
| Have you contacted Cyndi Weingard in Corporate & Foundation Relations (CFR) about this project? | | | | | | |
| If you are seeking funding for this project from other internal or external sources, please indicate sources and amounts of that funding below (and attach summary page from RFP if available): | | | | | | |
| If you have attempted to fund this project before, please indicate the following:  When you applied:  Funders you applied to:  Funding you received: | | | | | | |
| **APPROVAL PROCESS: SIGNATURES** | | | | | | |
| (1) Principal Investigator Date: | | | (4) Greg Gingras, Chief Financial Officer Date: | | | |
| (2) Dean or Department Chair (or immediate supervisor)  Date: | | | (5) Fred Baldini, Provost & VP Academic Affairs Date: | | | |
| (3) Cyndi Weingard, Exec. Dir. CFR  Date: | | |  | | | |

**Samuel Merritt University**

Project Budget

*To Accompany External Funding Pre-Approval Form*

Name of proposed grant-funded project:

Project start and end:

Principal Investigator:

PERSONNEL *(please include* & *specify· release time stipends and/or supplemental amounts for faculty staff and students)*

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | Total Amount |
| Position: |  |  |  |
| Position: |  |  |  |
| Position : |  |  |  |
| Position |  |  |  |
| Position |  |  |  |
| (add as needed) | | |  |
| FRINGE BENEFITS *(calculate at 28% of total amount for faculty* & *staff)* | | | |
| Name of Person 28% | | | Total Amount |
| Position: (copy from above) |  |  |  |
| Position: (copy from above) |  |  |  |
| Position: (copy from above) |  |  |  |
| Position: (copy from above) |  |  |  |
| Position: (copy from above) |  |  |  |
| (add as needed)  CONTRACTORS/CONTRACTED SERVICES | | |  |
|  |  |  |  |
|  |  |  |  |
| PROJECT MATERIALS & SUPPLIES | | |  |
|  |  |  |  |
|  |  |  |  |
| TRAV EL/TRANSPORTATION | | |  |
|  |  |  |  |
|  |  |  |  |
| EQUIPMENT | | |  |
|  |  |  |  |
|  |  |  |  |
| UNIVERSITY INDIRECT/OVERHEAD AMOUNT *(if allowed by funder* ) | |  |  |
|  |  |
| AMOUNT TO BE PROVIDED BY SMU *(if applicable)* | | |  |
| Please specify: |  |  |  |

Name of Person Pay Rate

**TOTAL REQUEST:** .\_:$:; \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_.

Please contact Cyndi Weingard (cweingard@samuelmerritt.edu) with questions or to request assistance.

# Appendix A

**Checklist for SMU Resources and Compliance Considerations**

Check whether the proposed project will involve any of the following:

# SMU RESOURCES

Information Technology Services (ITS) Resources: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facility Resources: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Affairs Resources: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Media Services: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost Sharing/Matching Funds (must be noted on External Funding Pre-Approval Form)

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# COMPLIANCE CONSIDERATIONS – Please check all that apply

# *Note: additional information may be requested*

Institutional Review Board Approval – i.e. human subject research

Patents/Copyrights/Intellectual Property Issues Due to Creation of Novel or Derivative Works

Confidentiality Requirements/Publication Restrictions

Involvement of Foreign Entities or Foreign Nationals, International Activities, or International Sponsors

Subcontracts Anticipated

Projects involving Biological or Chemical Hazards, DEA Controlled Substances and Listed Chemicals, or Ionizing Radiation will be subject to SMU Biosafety Committee Review

Questions? Contact Cyndi Weingard, Executive Director of Corporate & Foundation Relations

[cweingard@samuelmerritt.edu](mailto:cweingard@samuelmerritt.edu) | 510-463-7016