

**Austin Peay State University**  
**Office of Grants and Sponsored Programs**  
**Internal Review and Routing Sheet**

<b>GSP USE ONLY</b>	DATE:	GSP ID#:
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1. PROJECT TITLE	2. SPONSOR NAME AND ADDRESS:
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3. Project Period:	4. Submission Deadline:
5. Number of Copies to be Submitted:	6. Method of Delivery (circle one):    Hand Deliver Overnight    Postmark    Fax    Electronic

7. Principal Investigator(s):  Department _____ Phone _____ E-mail _____	8. Co-Principal Investigator(s):  Department _____ Phone _____ E-mail _____
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9. Proposed Budget (year one only)	10. For multiple year budgets indicate cumulative amounts.
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Line Item	Agency Support	APSU In-kind & *Cash Match	Other Source of Match	Line Item	Agency Support	APSU In-kind & *Cash Match	Other Source of Match
Salaries & Wages				Salaries & Wages			
Fringe Benefits				Total Direct Costs			
Equipment				F&A			
Supplies				<b>Total Costs</b>			
Travel				<div style="border: 1px solid black; padding: 10px;">           Indirect Cost Rate:                45% of total salaries and wages             Fringe Benefit Rates:                28% regular salaries                8% extra labor                1% graduate students                1% student labor         </div>			
Tuition							
Consultants							
Contractual							
Other Direct Costs							
Total Direct Costs							
F&A							
Training Stipends							
<b>Total Costs</b>							

Budget Comments (include information on F&A/indirect cost):
<b>If other than 45% of total salary, how was F&amp;A calculated?</b>

**11. \*NOTE: Please complete this section for all APSU Cash Match**

Fiscal Year	Fund	Organization	Fund Description	Match \$

**Total: \$**

**Positions**

- Yes  No Project will require creation of new positions from grant funds.  
 Yes  No Project will require creation of new positions from institutional funds,

**Certifications Regarding Regulatory Compliance**

- Yes  No All Co-PI/PDs certify that they do not hold significant financial interests related to the project.  
 Yes  No All Co-PI/PD(s) who hold significant financial interests related to the project that may be affected by the project have filed the appropriate disclosure statements.  
 Yes  No All Co-PI/PDs certify that they are not delinquent on any Federal debts and are bedarred or susoended from receipt of Federal funds.

**Space and Equipment Needs** (If Yes to any of the following questions, identify the University administrator responsible with a support letter from that administrator.)

- Yes  No Will space be required for office(s), office equipment, instructional or research equipment?  
 Yes  No Will space alterations be required for office(s), office equipment, instructional or research equipment?  
 Yes  No Will space require additional electrical service for equipment/computers?

**Academic and Administration Program Changes** (If Yes, attach a letter of explanation.)

- Yes  No Will this project involve the development or implementation of a new academic major, new academic degree, or new interdisciplinary arrangement?  
 Yes  No Does this proposed project envision an advising or governing role for a project committee?  
 Yes  No Is it anticipated that this project will create a new administrative unit?

**Institutional Obligations** (If Yes, attach a letter of explanation.)

- Yes  No If the project is funded, will APSU, or any unit within APSU, be responsible for continuation of it in any respect when it expires?

**Compliance Review**

- Human Subjects  Patent and Copyright  
 Animal Subjects  Laboratory Safety  
 Hazardous Materials  Other

**Funded Projects**

Is billing required?  Yes  No  
 If yes, who will do the billing?  Grants Accountin  Your Org.  Other \_\_\_\_\_  
 What is the frequency of billing?  Monthly  Quarterly  Semi-annua  Annual

Are reports required?  Yes  No  
 If yes, which?  Financial  Project Summary  Project and Paten  Other \_\_\_\_\_

Is PI responsible for any reports?  Yes  No  
 If yes, which ones? \_\_\_\_\_

Will grant money go into a pre-existing fund (account)?  Yes  No  
 If yes, which fund(s)? \_\_\_\_\_

**Approvals:** (Commitments of resources must be approved by all cognizant unit heads. Include % of responsibility each Co-PI will commit toward this project. If there are other PI's, please include an attachment.)

		% of time on this project	GSP will obtain the signatures listed below.	
		%		
Principal Investigator/Project Director	Date	%	Director of Research and Sponsored Programs	Date
Principal Investigator/Project Director	Date	%	Dean of Graduate Studies	Date
Principal Investigator/Project Director	Date	%	Vice President for Academic and Affairs	Date
Chairperson or Unit Head	Date	%	Vice President for Finance and Administration	Date
Dean, Director or Vice Chancellor	Date	%	President	Date