

# AUBURN UNIVERSITY COVER FORM

NEW PROCESS

OSP #:

Dept #:

Is this a new fund, mod to existing fund, or other? (If mod, fill in # below) \_\_\_\_\_ Is this a Basic? \_\_\_\_\_

Fund/Org/Prog \_\_\_\_\_

1. PI & Co-PIs (LIST ALL) \_\_\_\_\_

Dept(s) \_\_\_\_\_ College(s)/School(s) \_\_\_\_\_

Project Title \_\_\_\_\_

Sponsor Name & Address \_\_\_\_\_

Sponsor EIN \_\_\_\_\_ Is this a foreign sponsor? \_\_\_\_\_

2. Duration: Budget Period \_\_\_\_\_ To \_\_\_\_\_ Project Period \_\_\_\_\_ To \_\_\_\_\_

3. Budget Summary		Current Budget Period		Total Obligated To Date		Total Expected from Sponsor	
On	Off Campus	Sponsor	AU	Sponsor	AU	Sponsor	AU
Direct Costs		_____	_____	_____	_____	_____	_____
Indirect Costs		_____	_____	_____	_____	_____	_____
IDC Rate _____ %							
<b>TOTALS</b>		_____	_____	_____	_____	_____	_____
TDC	MTDC	Other*	*Explain Other: _____				

4. Cost sharing (amount and source): \_\_\_\_\_

5. Will this Project Involve:

a. Biosafety hazards Approved BUA & expiration: \_\_\_\_\_ BUA Reviewed by \_\_\_\_\_

b. Human Subjects Approved IRB & expiration: \_\_\_\_\_ IRB Reviewed by \_\_\_\_\_

c. Animals Approved PRN & expiration: \_\_\_\_\_ IACUC Reviewed by \_\_\_\_\_

6. Codes Field of Science Code \_\_\_\_\_ Fund Type \_\_\_\_\_

Program Code \_\_\_\_\_ Award Type \_\_\_\_\_

7. Other Information CFDA Number \_\_\_\_\_ Contract/Grant # \_\_\_\_\_ Subcontracts? \_\_\_\_\_ Mod Required? \_\_\_\_\_

Corresponding Proposal # \_\_\_\_\_ FAIN Number \_\_\_\_\_ Initiative (if applicable) \_\_\_\_\_

(or ANP or X) Prime Sponsor & Contract # \_\_\_\_\_

*\*For ANP approvals, please send via email\**

8. AU (Division 1) AAES (Division 3) ACES (Division 4)

Instruction (1xxx) Research (2xxx) Extension (3xxx) Other (3xxx)

9. Remarks \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Distribution (OSP Use Only)

Accounting (cgaadm@auburn.edu)  
 OSP (ospdist@auburn.edu) Compliance  
 Subcontract Administrator IAC  
 Contract Administrator Security Officer  
 Dean (PI)  
 Dept (PI)  
 Other(s): \_\_\_\_\_

## Security/Other Notes

Classified  
 Controlled Unclassified Info  
 DFAR-7012  
 ITAR / Export controls involved  
 Citizenship Restrictions

Equipment  
 AO GO GF SO  
 Publication Restrictions  
 ONR administered  
 International Collaboration

## Tracking

Contract Admin: \_\_\_\_\_

CF Created by: \_\_\_\_\_

In Date: \_\_\_\_\_ Sent to CA: \_\_\_\_\_

HFA: Out: \_\_\_\_\_ In: \_\_\_\_\_

IAC: Out: \_\_\_\_\_ In: \_\_\_\_\_

IACUC/IRB: Out: \_\_\_\_\_ In: \_\_\_\_\_

Biosafety: Out: \_\_\_\_\_ In: \_\_\_\_\_

CA: Out to ERA: \_\_\_\_\_

Contract Administrator \_\_\_\_\_ Date \_\_\_\_\_

Vice President for Research & Economic Development \_\_\_\_\_ Date \_\_\_\_\_

DISTRIBUTION: \_\_\_\_\_ Date: \_\_\_\_\_ LOG OUT: \_\_\_\_\_ Date: \_\_\_\_\_