



Office of Sponsored Programs

## **Notice of Intent to Submit**

A completed form is required if you intend to submit a proposal to a funding opportunity. If you have any questions, please contact [osp@esc.edu](mailto:osp@esc.edu) for assistance.

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### ***Principal Investigator Information***

Principal Investigator:

PI Email:

PI Telephone Number:

PI Department:

Name or Program Chair or Supervisor:

Email of Program Chair or Supervisor:

### ***Sponsor Information***

Funding Agency/ Organization:

Funding Agency Initiative/ Program Title:

Call for Proposal or RFP link:

Agency Submission Deadline:

Preliminary Project Title:

Will there be animal or human testing?      Yes      No

    If Yes, have you submitted an IRB?      Yes      No

Amount of Funding Requested:

Project Period:

Start date:

End date:

***Budget Specifics***

Does the proposal involve cost sharing?      Yes      No

If Yes, how much?

Does this proposal involve subcontracts?      Yes      No

    If Yes, with whom?

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***Required Signatures***

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Principal Investigator Signature

Date

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Signature of Supervisor

Date

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Signature of Dean

Date

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Signature of Provost

Date