

# Sponsored Program Checklist

The University of Tampa  
Office of Sponsored Programs

Please type to complete this form, following the instructions listed on Page 3.

## Investigator Data

1. Project Director/Principal Investigator:		2. Phone:
3. Department:	4. E mail:	
<b>Proposal/Compliance Data</b>		
5. Type: <input type="checkbox"/> Federal <input type="checkbox"/> State of FL <input type="checkbox"/> Private <input type="checkbox"/> Other (Specify):		6. Deadline: Date: Time:
7. Name:	8. Contact: ( )	9. Phone:
10. Email:	11. Program Name:	

## Proposal/Compliance Data

13. Title of Proposal:	14. Project Period:
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15. Proposal Submission:  Mail  Grants.gov/Electronic Submission

16. Proposal type: <input type="checkbox"/> New <input type="checkbox"/> Renewal	17. Project Type: <input type="checkbox"/> Basic Research <input type="checkbox"/> Programmatic <input type="checkbox"/> Instruction <input type="checkbox"/> Public Service <input type="checkbox"/> Student Support	18. Proposal Type: <input type="checkbox"/> Grant <input type="checkbox"/> Sub-award <input type="checkbox"/> Other (Specify)	19. Compliance Data (attach copy of approval) Human Subjects: No Yes UTIRB Approval: No Yes Pending * Animal Subjects: No Yes h d / h % % % CE NO o W e Current Year Budget ^ % } v • } CE \$ UT Cost Sharing Account No: Other Support E u } ( ) v š CE ; μ š
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Total Costs \$

	22. Course release requested? No Yes If yes, please attach detailed justification and a
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>



