



## PROPOSAL APPROVAL FORM INSTRUCTIONS

Edward Via College of Osteopathic Medicine  
Office of Research Administration

The Office of Research Administration's Proposal Approval Form is required for all external and internal proposals as well as other projects submitted through VCOM. The form is used to facilitate the review and approval requests from the appropriate VCOM division and the VCOM administration. This form must be completed and signed before the submission of the following activities:

- A new grant application
- A continuation or renewal
- A revised grant application
- Pre-proposal that involves budgetary information or other commitments
- Supplemental funds not in original agreement

### Project Information

**Principal Investigator/Program Director:** The PI/PD is responsible for the administrative and programmatic aspects of the project. In cases where there are multiple PIs on a project, the contact PI should be listed here and the others listed in the "Personnel and Departmental Information" section, with their roles being "principal investigator."

**Project Info:** If the proposal is in response to a Program Announcement, RFA or other request, please enter that number in the appropriate space. If it is not in response to a specific request, check "unsolicited."

**Project Type:** "New" is any original, first time submission to a sponsor; "Letter of Intent/Pre Proposal" is a submission for preliminary review, sometimes required before invitation for a full application; "Resubmission" is a modification to a previously submitted application and to the same sponsor; "Continuation/Supplement" is a request for funds previously committed by the sponsor; "Transfer to VCOM" is a currently active grant that the PI is requesting to move from their previous institution to VCOM.

**Activity:** Please be sure to check the type of activity your project falls under. Check all that apply.

**Subcontractors or Consultants:** If "yes" is checked, list the name of the proposed subcontracting institution or consultant. An application including, at a minimum, a letter of intent, a budget and as statement of work is required from a subcontracting institution's authorizing official. A letter of intent outlining work scope and fees is required from a consultant.

### Personnel and Departmental Information

This section must include all VCOM personnel active on the project. This includes lab assistants, student workers, clinical coordinators, etc. List the PI first, then other senior/key personnel and then other personnel.

**Project Role:** List the individual's role on the project (PI, investigator, lab technician, etc.), not the individual's job title at VCOM.

**Proposed Effort:** List each individual's proposed amount of effort needed to complete their role on the project. These effort percentages should match up with the effort percentages for each project member on the proposal budget.

### Budget Information

**Period of Performance:** Enter the expected start date and end date (MM/DD/YY) of the project. Please check the application instructions as many sponsors have a required performance period.

**F&A Rate:** Identify the facilities and administrative rate for the proposed activity. Use VCOM's established F&A rate of 53.5% for on-campus (VA Campus) and 25% for off-campus. Note that some sponsors indicate a minimum rate or allow no rate at all. For either case, please indicate this to ORA staff prior to beginning your budget.

**Direct Cost:** This row is for direct costs associated with the project for each year. For the purposes of this form, please include any subcontractor costs, both direct and indirect, in the total direct costs per year.

**F&A Costs:** This row is for VCOM's yearly F&A (indirect) costs on the project.

**Cost Sharing:** Cost sharing (matching) is any cost not borne by the sponsor. If cost sharing is required, the Cost Share Approval Form must be completed and attached to this form. **Note that all cost sharing or matching commitments must be discussed with the ORA prior to development of the budget.** Signature approval of the Associate Dean and the Dean is required on the Cost Share Approval Form.

## Sponsor Information

Indicate the sponsor legal name as well as type of sponsorship (federal funds, federal funds flowing through another entity, state, foundation or industry). If there is a specific name of the program you are applying to, please indicate that. Include the sponsor contact for administrative inquiries and/or submission. Be sure to list the date the proposal is due, and indicate if the proposal must be submitted electronically or is to be mailed.

## Assurances & Compliance Information

**Research Financial Conflict of Interest Disclosure Form:** This form must be completed by all personnel listed on the project who have responsibility for the design, conduct or reporting of research (including data collection and analysis). If any of the questions are checked "yes," that individual must also complete the Supplemental FCOI Disclosure Form.

**Intellectual Property:** If this project will involve IP or it is believed that IP could potentially be developed from this project, check "yes." An Invention Disclosure Form may be required.

**Human Subjects Research:** If this is checked "yes," a protocol and other material must be submitted to the VCOM IRB. Note that many sponsors do not require IRB approval at the time of submission; be sure to check the sponsor's guidelines prior to beginning the application. If approval is not required at time of submission, please check the "IRB approval pending" box. If approval is required at the time of application submission, please indicate this and attach the IRB approval letter to this form.

**Vertebrate Animals:** Approval must be obtained from Virginia Tech's IACUC. Most sponsors do not require IACUC approval at time of submission. If VT IACUC has reviewed and approved the protocol, indicate this and attach the letter to this form.

**Cost Sharing:** If cost sharing is committed, be sure the budget section indicates this as well. A complete and signed Cost Share Approval Form must accompany this form.

**Radioactive Materials/Hazardous Waste/Biohazards:** If the proposed activity involves any of these materials, indicate which ones. Additional forms and/or clearances may be involved.

## Required Signatures

**Principal Investigator:** The PI must sign this form to certify the following: The information submitted within the application is true, complete and accurate to the best of the PI's knowledge; any false, fictitious, or fraudulent statements or claims may subject the PI to criminal, civil, or administrative penalties; and the PI agrees to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded as a result of the application.

**Associate Dean:** After reviewing this form and the application, the PI's Associate Dean must sign certifying that: The proposed activities are appropriate to the research, instruction or public service mission of VCOM; and the necessary resources for the project, including percent of investigator(s) effort and space and/or facilities are committed and/or budgeted.

**ORA Director:** the ORA Director will review the form for accuracy and completeness, and ensure all appropriate signatures and additional forms are included if required prior to signing.

**Please contact Greg Reaves for any questions on this form or the application process.**

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