**INSTRUCTIONS FOR USING INDIVIDUAL PRE-PROPOSAL COVER PAGE**

***For use at the PI’s institution for obtaining approval by Sponsored Programs Office.***

If your institution requires approval from the Grants or Sponsored Programs Office on ‘pre-proposals’, you may use the attached form when you submit your Individual Research Area Pre-Proposal for internal processing. This is not a required component of the Pre-Proposal, and therefore should be used separate from the Cover Page included with the ‘Section 3’ forms.

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| --- |
| **FY16-17 RESEARCH AREA (RA) PROJECT PRE-PROPOSAL APPLICATION FOR FUNDING** |
| 1. **LEGAL NAME OF ORGANIZATION TO WHICH AWARD SHOULD BE MADE**
 | **3. NAME OF AUTHORIZED ORGANIZATIONAL REPRESENTATIVE**  | **4. a. PHONE NUMBER**  |
|  |
| **b. FAX NUMBER** |
|  |
| **c. E-MAIL ADDRESS** |
|  |
| **2. ADDRESS *(Give complete mailing address and Zip Code-including Country)*** | **5. ADDRESS OF AUTHORIZED ORGANIZATIONAL REPRESENTATIVE *(If different from Item 2.)*** |
|  **6. TITLE OF PROPOSED PROJECT (80-character Maximum, including spaces)** |
| **7. APPROXIMATE PERIOD OF PROPOSED PROJECT DATES** MAY 2016 – APRIL 2018 | 8. DURATION REQUESTED24 MONTHS | **9. TOTAL FUNDS REQUESTED** **Year 1 $:** **Year 2 $:** **IDC Rate:**  **%1** |
| **10. PRINCIPAL INVESTIGATOR AND CO-INVESTIGATOR(S)** | **11. a. PI’S PHONE NUMBER**:  |
| **a. Name of Principal Investigator (First, Middle, Last)**  |  **b. FAX NUMBER**:  |
|  |   **c. E-MAIL ADDRESS**:  |
| **b. Name of Co-Investigator #1 (First, Middle, Last)**  | **12. PI’s BUSINESS ADDRESS** (Include Department/Zip Code) **ALTERNATE SHIPPING ADDRESS** (i.e. FEDEX) |
|  |
| **c. Name of Co-Investigator #2 (First, Middle, Last)** |
|  |
| **d. Name of Co-Investigator #3 (First, Middle, Last)** |
|  |
| **e. Name of Co-Investigator #4 (First, Middle, Last**) |
|  |
| **f. Name of Co-Investigator #5 (First, Middle, Last**) |
|  |
| **13. DESIGNATE WITH AN 'X' ONE RESEARCH AREA (RA) WHOSE DESCRIPTION AND PRIORITIES YOUR PROJECT IS DESIGNED TO ADDRESS.**FHB Management (MGMT) \_\_\_\_Food Safety and Toxicology (FST) \_\_\_\_Gene Discovery and Engineering Resistance (GDER) \_\_\_\_ Pathogen Biology and Genetics (PBG) \_\_\_\_None of the above \_\_\_\_ | **14. BELOW LIST THE FY16-17 RA-SPECIFIC RESEARCH PRIORITIES ADDRESSED BY THIS PROPOSED RESEARCH:**  |
| FOR OFFICE USE ONLY [ ]N [ ]C (\_\_\_\_) MGMT FST GDER PBG  | FY16-  |
|  **SIGNATURE OF PRINCIPAL INVESTIGATOR (Not required by USWBSI):** | **DATE** |
| **SIGNATURE OF AUTHORIZED ORGANIZATIONAL REPRESENTATIVE** *(****Not required by USWBSI)*** | **TITLE** | **DATE** |

1IDC rate’ refers to Indirect Cost Rate or Overhead Rate (Not applicable for USDA-ARS PIs).