

Wartburg College Grant Sign-Off Sheet

Project Director/Principal Investigator _____

Funding Source _____ Grant Deadline* _____

Project Title _____ Amount Requested: _____

Other Participating Wartburg Faculty/Staff _____

Does this project require Wartburg matching funds? If so, amount and account: _____

*This form must be submitted to the Sponsored Programs Administrator at least **10 days before deadline.**

| | YES | NO |
|--|-----|----|
| Is additional fundraising required for this project or future sustainability of the program? If "yes," approximately how much? _____ | | |
| Sabbatical or leave | | |
| New or replacement academic or staff position | | |
| Academic year salary for current faculty or staff | | |
| Summer salary for current faculty or staff | | |
| Fringe benefits | | |
| Does the funder allow indirect costs? A. If "yes," are you using Wartburg's federally-negotiated rate (20.3% of total direct costs)? B. If not, what rate are you using? | | |
| Will Wartburg be collaborating with one or more other institutions? If so, please list collaborating institutions: _____ A. Will Wartburg be a sub-awardee? B. Will Wartburg be the prime awardee with other institutions as sub-awardees? | | |
| Project involves human subjects | | |
| Project involves use of animals | | |
| Additional office or lab space required | | |
| Construction or renovation | | |
| Acquisition of equipment | | |
| Acquisition of computer hardware or software | | |
| International travel | | |
| Use and disposal of hazardous materials | | |
| Use and disposal of radioactive substances | | |
| Recombinant DNA | | |
| Will any domestic students be paid? | | |
| Will any international students be paid? | | |

Please attach the following: (1) a draft of the project narrative and budget; (2) a one-paragraph description of the financial impact of the project on the college; and (3) a statement on how this project advances Wartburg's strategic plan.

Project Director/ Date

Area Vice President/Date

VP for Advancement/Date

Department Chair /Date

Chief Business Officer/Date

Sponsored Programs Admin./Date

Acad. VP/Dean of Faculty/Date

(authorizes submission)