

TOURO UNIVERSITY

Office of Sponsored Programs (OSP) Proposal Transmittal and Approval Form

Type of Proposal

- New Project
- Non-Competing Continuation
- Competing /Renewal
- Supplement *****
- Pre-Proposal
- Revised Budget (Sponsor Required)

PI Name:	Phone #	Email:
Dept./Program/Center:	Position/Title:	

Co-PI Name (s):

Proposed Subrecipients Organization(s) or Institution(s):

School:		
Graduate Division <input type="checkbox"/> Business <input type="checkbox"/> Education <input type="checkbox"/> Jewish Studies <input type="checkbox"/> Social Work <input type="checkbox"/> Technology <input type="checkbox"/> Health Sciences <input type="checkbox"/>	Undergraduate Division <input type="checkbox"/> Lander College of Arts & Sciences Lander <input type="checkbox"/> College for Men <input type="checkbox"/> Lander College for Women <input type="checkbox"/> New York School of Career & Applied Studies <input type="checkbox"/> School for Lifelong Education <input type="checkbox"/> Machon L'Parnasa-IPS <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Professional <input type="checkbox"/> Osteopathic Medicine <input type="checkbox"/> Pharmacy <input type="checkbox"/> Dental Medicine <input type="checkbox"/> The Jacob D. Fuchsberg Law Center <input type="checkbox"/> New York College of Podiatric Medicine

Sponsor:	Sponsor Solicitation Number: _____
Contact Name:	Proposed Deadline Day/Time: _____
Phone:	
Email:	

Project Title:

Type of Program <input type="checkbox"/> Research <input type="checkbox"/> Demonstration Public <input type="checkbox"/> Service Institutional <input type="checkbox"/> Training Individual <input type="checkbox"/> Fellowship <input type="checkbox"/> Facilities/Equipment <input type="checkbox"/> Conference <input type="checkbox"/> Other	Proposed Project Start Date : Proposed Project End Date: Facilities & Administrative (F&A) Cost Rate(s) <input type="checkbox"/> Federal On Campus % (Rate = 56.00%) <input type="checkbox"/> Federal Off Campus % (Rate = 17.00%) <input type="checkbox"/> Other % (Rate) _____
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Funds Requested	1 st Budget Period	2 nd Budget Period	3 rd Budget Period	4 th Budget Period	5 th Budget Period	Total Project
Direct Cost	_____	_____	_____	_____	_____	\$0.00
F & A Cost	_____	_____	_____	_____	_____	\$0.00
Total Cost	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
If applicable: Cost Sharing/ Matching						
<input type="checkbox"/> Mandatory or						
<input type="checkbox"/> Voluntary Contributed						\$0.00
Total Project	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Please list all artificial intelligence (AI) tools and technology used and explain how they were used:
Use additional pages, if needed.

