

Use this cover sheet for pre-proposals being submitted in response to funding solicitations or nominations for individual prizes or awards that require university internal review and selection. University review is coordinated by the Office of Research Advancement and Partnerships.

- Pre-proposals for university review must include, unless otherwise stated in the limited submission program announcement, a project description and a budget that summarizes the total.
- Submit this general application to res.dev@wsu.edu.
- The Office of Research will notify the PIs of the results of the internal review process. The selected nominee will then complete a full proposal for submission.

<u>Principal Investigator Information:</u>			
Last Name:	First Name:	Title:	Responsible Home Department/Unit:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E-Mail Address:	Telephone Number:	Campus Zip Code:	Responsible Area/College/Campus:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<u>Departmental Contact Information</u>			
Last Name:	First Name:	E-Mail Address:	Telephone Number:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<u>Sponsor/Proposal Data:</u>		
Proposal Title:	<input type="text"/>	
Agency:	<input type="text"/>	
Agency Program:	Date Due at ORAP for Internal Review:	Date Due at AGENCY:
<input type="text"/>	<input type="text"/>	<input type="text"/>
This proposal is for Acquisition		This proposal is for Development
YES		NO
This pre-proposal is a re-submission?		
If YES, please explain the reviews and how you have addressed the reviewers concerns.		
Have you made contact with the Program Manager?		
If YES, please explain the advice received.		
Has the Program Manager encouraged re-submission?		

Additional documentation, required only if specified in the limited submission announcement:

- Statement of nomination from dean, chair, or unit head (Letters submitted for university review should be addressed to the funding agency)
- Letters of recommendation or support
- Other

Check if your proposal would require a letter from the Federal Delegation.

Required Signatures:

Principal Investigator / Nominator Signature:

Date:

Please use *NO MORE THAN 3 PAGES* to answer the below questions.
Page limit does not include Cover Sheet or 1 page budget justification.

Begin Date _____ **End Date** _____ **Amount Requested** _____ **Match (if required)** _____

Project Summary: *Provide a one-paragraph summary of your project describing the purpose and the essential elements of the proposed activity, written in terms that can be understood by the non-specialist.*

All proposals: *An explanation of the extent to which the proposed project will make a substantial improvement in WSU's capabilities to conduct leading-edge research, provide research experience for undergraduate students, and broaden the participation of science & engineering research by women and underrepresented minorities.*

For Acquisition Proposals: *Briefly explain the extent of shared use of the instrumentation for research or research training.*

For Acquisition Proposals: *Provide a preliminary management plan detailing the availability of sufficient infrastructure and technical expertise to allow effective usage of the instrument.*

For Development Proposals: *Give an explanation of the appropriateness of this submission as a development proposal.*

For Development Proposals: *Provide an explanation of the availability of appropriate technical expertise to design and construct the instrument (if student involvement is included, reviewers will be asked to evaluate such involvement in terms of instrument needs and training for next generation instrumentalists).*

For Development Proposals: *Give an explanation of the need for the development of the new instrument. Will it enhance performance over existing instruments, or new types of measurement or information gathering? Is there a strong need for the new community in the larger user community?*

Budget & Justification:

The NSF MRI Program requires 30% institutional cost share. Commitments are not required at this time, but enter the estimated amount below. Please do not contact the VP for Research for cost share/matching approvals at this stage. If your project is selected, cost share issues will be negotiated with the Office of Research through the appropriate Chair/Dean/Chancellor at that time.

			\$ Grant
Salaries		\$	_____
Wages		\$	_____
Fringe Benefits		\$	_____
Supplies/ Services		\$	_____
Travel		\$	_____
Equipment		\$	_____
Sub Award(s)			_____
Other Direct Costs		\$	_____
Total Direct Costs		\$	=====
F&A/Overhead/Indirect Costs	_____ %	\$	_____
Total Amount Requested			=====
Total Proposed Match (if required)			=====
Total Project Cost		\$	=====

Budget Justification, include a description of Match costs if applicable: *Briefly provide a written description of all costs included in the budget table.*