



RIDER
UNIVERSITY

Grant Proposal Review Form for Government-Funded Grants: Approval required *before* submission

Proposal Title _____ Author _____

Proposal Status

New Submission

Continuation

Term of Grant _____

Submission Deadline _____

Funding Source: _____

Contact: _____ Telephone (____) _____

Financial Summary

Total sought from funding source: \$ _____

Total proposal overhead: \$ _____

Total commitment from Rider

Matching funds: _____ Budget source(s): _____

Other forms of institutional commitments: _____

(E.G. technology needs, additional staffing, space, etc.): _____

\$ _____

OIT approval (*for technology purchases*) _____ Date: _____

Human Resources approval (*for new/ changed positions*) _____ Date: _____

Human subjects research: This proposal does _____, does not _____ involve human subjects research. If human subjects research is involved, this proposal has _____, has not _____ been reviewed by UIRB.

Workload Implication (*load reduction and term*): _____

Approvals

Principal Investigator: _____ Chair: _____ Dean: _____

Date: _____ Date: _____ Date: _____

Ten business days must be allowed for proposal review. For authorization, submit your proposal for government funds and this form to: **Michael Rutkowski, Grants Manager, BLC 30, mrutkowski@rider.edu**. (If your proposal seeks foundation or corporate support, please contact Denise Pinney, Director of Corporate and Foundation Relations, at dpinney@rider.edu.)

Required Signatures

Signature: _____ Date: _____

VP Finance

Signature: _____ Date: _____

Associate Provost

Signature: _____ Date: _____

Provost

If the proposal requires the signature of the President, additional time may be required.