

**WEST CHESTER UNIVERSITY GRANT/CONTRACT COVER SHEET  
FOR ALL PUBLIC AND PRIVATE SPONSORS  
For Internal Use Only**

This Cover Sheet must be submitted with ALL GRANT APPLICATIONS. This includes internal SSHE grant applications as well as grant applications soliciting funds from public and private sources (including foundations and corporations). When seeking external funding, a completed copy of this sheet and a complete proposal should be submitted to the Office of Sponsored Research **AT LEAST 5 WORKING DAYS BEFORE THE MAILING DEADLINE** with the signatures of your Department Chair and Dean. All other signatures will be obtained by the staff in the Office of Sponsored Research before being submitted to the Provost for final approval.

Applicant's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Department/School or College: \_\_\_\_\_

Project Title: \_\_\_\_\_

Program Title (if applicable): \_\_\_\_\_

Funding Source: \_\_\_\_\_ Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Amount Requested from Agency: \$ \_\_\_\_\_ Indirect Cost Recovery: \$ \_\_\_\_\_

**Proposal anticipates:**

|                         |                  |                                   |                  |
|-------------------------|------------------|-----------------------------------|------------------|
| new faculty positions   | _____yes _____no | new degree, major and/or courses  | _____yes _____no |
| faculty reassigned time | _____yes _____no | revisions to major and/or courses | _____yes _____no |
| new equipment           | _____yes _____no | new non-instructional positions   | _____yes _____no |
| new students            | _____yes _____no | new graduate assistantships       | _____yes _____no |

**This project involves:**

|                 |                  |                       |                  |
|-----------------|------------------|-----------------------|------------------|
| human subjects  | _____yes _____no | radioactive materials | _____yes _____no |
| animals         | _____yes _____no | hazardous substances  | _____yes _____no |
| recombinant DNA | _____yes _____no |                       |                  |

**Confirmation of Existing SPACE (please initial approval):** P.I. \_\_\_\_\_ Department Chair: \_\_\_\_\_ Dean: \_\_\_\_\_

**If you have answered yes to any of the above, attach appropriate documents.**

**The proposed project or relationship with this Sponsor (check one) \_\_\_ does \_\_\_ does not require the disclosure of significant financial interests that present an actual or potential conflict of interest for investigators involved in this project;** if answered in the affirmative, then all investigators so involved shall provide complete disclosure as instructed by University policy and/or Federal regulations (see Financial Interest Disclosure Form).

*As the PI, I assure that the information submitted within this grant application is true, complete and accurate, to the best of my knowledge. I may be subjected to criminal, civil or administrative penalties for knowingly submitting false, fictitious, or fraudulent statements or claims. If an award is made, I am responsible for compliance with award terms and conditions and University policies and procedures; particularly for the technical conduct of the work, submission of technical reports, regulatory compliance, and financial management.*

Signature of Principal Investigator/Project Director \_\_\_\_\_ Date: \_\_\_\_\_

University and PASSHE grant proposals require signatures of the Chairperson, Faculty Dean, and Provost. External grants require additional signatures. See instruction sheet

|  |                   |              |
|--|-------------------|--------------|
| <b>Department Chairperson:</b>                         | <b>Signature:</b> | <b>Date:</b> |
| <b>Faculty Dean:</b>                                   | <b>Signature:</b> | <b>Date:</b> |
| <b>Executive Director, Academic Computing*:</b>        | <b>Signature:</b> | <b>Date:</b> |
| <b>Vice President, Fiscal Administrative Affairs*:</b> |                   |              |
| <b>AVP, Sponsored Research/Faculty Development:</b>    | <b>Signature:</b> | <b>Date:</b> |
| <b>Director, Restricted Funds:</b>                     | <b>Signature:</b> | <b>Date:</b> |
| <b>VP for Advancement:</b>                             |                   |              |
| <b>VP for Academic Affairs/Provost:</b>                | <b>Signature:</b> | <b>Date:</b> |

### WCU COMMITMENT TO PROJECT

If you are requesting a commitment from WCU, the following information must be provided.

| <b>Type of Contribution</b> | <b>Amount</b> | <b>Source<br/>(Cost Center#)</b> | <b>Signature</b> |
|-----------------------------|---------------|----------------------------------|------------------|
|                             |               |                                  |                  |
|                             |               |                                  |                  |
|                             |               |                                  |                  |

\*These signatures are required on an as-needed basis only.

*Please review and address Technology Transfer and Commercialization statement on following page.*

## TECHNOLOGY TRANSFER AND COMMERCIALIZATION STATEMENT

It is understood that the West Chester University of Pennsylvania and third-parties may have rights in all discoveries and inventions made or conceived in performance of work on this project. The Principal Investigator(s) will furnish prompt and full disclosure of inventions made during performance of this project to the University's Authorized Official. I have received the Technology Transfer and Commercialization Guide for PASSHE Faculty which is available at <http://www.wcupa.edu/facstaff/facdev/SponsoredResearch/PreAward.asp>.

I, the project director, (check one):

anticipate or  do not anticipate  
developing Intellectual Property during this research/project.

The anticipated Intellectual Property is as follows (check all that apply):

- Publications/presentations
- Software
- Inventions or discoveries

Describe above Intellectual Property in general terms.

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*NOTE: The above statement is to be incorporated into each proposal or contract/ agreement submittal form that is transmitted to the CAO of each University. This statement will be signed by all faculty and staff members (except clerical and non-technical staff) who will be participating in the project.*