**VITERBO UNIVERSITY GRANT INITIATION FORM**

**The Grants Office requires a completed Grant Initiation Form from all faculty or staff prior to submitting a proposal for external funding. The process serves to advise and inform administration of financial implications and allows the Grants Office to provide you with grant and budget development assistance. Project directors who plan to submit a grant proposal should inform the Grants Office as early as possible.**

**Project Director/Principal Investigator:**  **Date**:

**Department:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email**:

**Project Title and Brief Summary (needs, methods, impact):**

**List budget elements that will be supported with grant funding (salaries, equipment, travel, etc.):**

**Foundation/Funding Agency:**

**Application Deadline:**  **Notification Date:**

**Amount of Request: $** **Estimated Total Project Cost: $**

**Project Start Date:** **Project End Date:**

**List any Project Partners/Collaborators:**

**Are Matching Funds Required?** \_\_\_\_\_**Yes** \_\_\_\_\_**No If yes, explain:**

**Will the university be expected to continue project activities after the grant period?** \_\_\_\_\_Yes \_\_\_\_\_\_No

**Throughout the application process, I agree to provide any and all necessary information to the Grants Office in a timely and reasonable manner.**

**Project Director:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please route as indicated to obtain signatures for Consent to Proceed:**

**Department Chair:** **Date:**

**Dean or Immediate Supervisor:**  **Date:**

**VPAA/Provost:**   **Date:**

**VP Finance/Administration:**  **Date:**

**VP Institutional Advancement:** **Date:**

**President:**  **Date:**

 ***Upon completion of the form, please return to Deena Murphy, Grant Coordinator, Grants Office (MC 530)***