**COVER SHEET FOR PROPOSAL TO THE BOARD OF REGENTS**

|  |  |
| --- | --- |
| FOR CONSIDERATION BY Louisiana EPSCoR | FOR BoR USE ONLYBOR PROPOSAL NUMBER |
| PROGRAM ANNOUNCEMENT/SOLICITATIONPlanning Grants for Major Initiatives |  |
| NAME OF ORGANIZATION TO WHICH AWARD SHOULD BE MADE: | ADDRESS OF AWARDEE ORGANIZATION, INCLUDING ZIP CODE: |
| TITLE OF PROPOSED PROJECT: |
| REQUESTED AMOUNT$  | REQUESTED STARTING DATE: |
| PI/PD DEPARTMENT | PI/PD POSTAL ADDRESS |
| NAMES (TYPED) | HighestDegree, Yr | Telephone Number/Fax Number | Electronic Mail Address |
| PI/PD NAME |  |  |  |
| CO-PI/PD |  |  |  |
| CO-PI/PD |  |  |  |

**INFORMATION BELOW PERTAINS TO THE PROPOSAL THAT WILL BE SUBMITTED AS A RESULT OF THIS AWARD**

|  |
| --- |
| NAME OF FEDERAL AGENCY PROPOSAL WILL BE SUBMITTED TO |
| PROGRAM ANNOUNCEMENT/SOLICITATION NO. ./CLOSING DATE |
| TITLE OF PROPOSED PROJECT: |
| REQUESTED AMOUNT$  | PROPOSED DURATION  months | REQUESTED STARTING DATE: |
| NAMES (TYPED) | Highest Degree, Yr | Telephone Number/Fax Number | Electronic Mail Address |
| PI/PD NAME |  |  |  |
| CO-PI/PD |  |  |  |
| CO-PI/PD |  |  |  |
| CO-PI/PD |  |  |  |

BoR FORM:PGMI

Planning Grants for Major Initiatives - Budget

|  |  |
| --- | --- |
| PROJECT YEAR: |  |
| ORGANIZATION |
| LEAD INVESTIGATOR/MENTOR |
| A. SENIOR PERSONNEL:  List personnel separately. Indicate number & type of months for each. | FundsRequested | InstitutionalMatch | TotalCosts |
| A.5-6 show total number Other in brackets. | CAL. | ACAD. | SUMR. |
|  | 1  |  |  |  |  |  |  |  |
|  | 2  |  |  |  |  |  |  |  |
|  | 3  |  |  |  |  |  |  |  |
|  | 4  |  |  |  |  |  |  |  |
|  | 5  | [ ] Other Senior Personnel |  |  |  |  |  |  |
|  | 6  | [ ] Total Senior Personnel |  |  |  |  |  |  |
| B. OTHER PERSONNEL (show #s) |  |  |  |  |  |  |
|  | 1  | [ ] Post Doctoral Assoc.  |  |  |  |  |  |  |
|  | 2  | [ ] Other Professionals |  |  |  |  |  |  |
|  | 3  | [ ] Graduate Students |  |  |  |
|  | 4  | [ ] Undergraduate Students |  |  |  |
|  | 5  | [ ] Secretarial/Clerical |  |  |  |
|  | 6  | [ ] Other |  |  |  |
| Total Salaries & Wages (A+B) |  |  |  |
| C. FRINGE BENEFITS (if charged as direct costs) |  |  |  |
| Total Salaries, Wages, & Fringe (A+B+C) |  |  |  |
| D. PERMANENT EQUIPMENT(List item & dollar amount for each item exceeding $5000) |  |
| Total Permanent Equipment |  |  |  |
| E. TRAVEL |  |  |  |
|  | 1  | Domestic (Incl. Canada & U. S. possessions.) |  |  |  |
|  | 2  | Foreign |  |  |  |
|  |  |
| F. PARTICIPANT SUPPORT COSTS |
|  | 1  | Stipends  |  |  |  |
|  | 2  | Travel  |  |  |  |
|  | 3  | Subsistence  |  |  |  |
|  | 4  | Other  |  |  |  |
| Total Participant Costs |  |  |  |
| G. OTHER DIRECT COSTS |  |  |  |
|  | 1  | Materials and Supplies |  |  |  |
|  | 2  | Publication Costs/Pages Charges |  |  |  |
|  | 3  | Consultant Services |  |  |  |
|  | 4  | Computer (ADPE) Services |  |  |  |
|  | 5  | Subcontracts |  |  |  |
|  | 6  | Other |  |  |  |
| Total Other Direct Costs |  |  |  |
| H. TOTAL DIRECT COSTS (A thru G)  |  |  |  |
|  I. INDIRECT COSTS (Not allowed under this competition.) |  |  |  |
| J. TOTAL DIRECT & INDIRECT COSTS (H + I) |  |  |  |

BOR budget form 1001B