VASSAR COLLEGE
SIGN-OFF TRANSMITTAL FORM

Principal Investigator/Project Director____________________________________________

Other Vassar Faculty:_________________________________________ Department:________

Project Title:________________________________________________________

Project Period: From:_________ To:_________ Sponsoring Agency:____________________

Total $ Requested:_______________ Total $ Requested from Vassar College:____________

Does this project involve any of the following? Comments YES NO

1. Matching funds (list pages in the proposal that outline the match) ______
2. Cost sharing (list pages in the proposal that outline the cost share) ______
3. Indirect or administrative costs ______
4. Released time for faculty ______
5. Leave of absence ______
6. Hiring of additional staff ______
7. Hiring of additional staff to work in another state ______
8. Human subjects ______
9. Laboratory animals ______
10. Recombinant DNA ______
11. Additional space, remodeling or construction ______
12. Radioactive substance: acquisition/maintenance/disposal ______
13. Toxic waste disposal ______
14. Summer salary ______
15. Student/faculty travel abroad ______
16. Students and/or post-doctorates participating in research ______
17. Acquisition of computer or other technology or other computer-related hardware, software or support ______
18. A commitment by the College beyond the grant period ______
19. I understand that reports required by the funding agency must be submitted in a timely manner or PI may be prohibited by Vassar from applying for future grants. ______
20. I have read VC’s Conflict of Interest Policy and will recertify this grant’s compliance with the policy annually if funded. ______

PI/Project Director____________________________________________________ Date_________________

Department Chair __________/_________ Controller __________/_________ Chief Information Officer (if applicable) __________/_________

Grants Officer __________/_________ Dean, Strategic Planning/Acad. Res. __________/_________ Vice President/Finance & Admin. __________/_________

Dean of the Faculty __________/_________ Exec. Director/Buildings & Grounds (if applicable) __________/_________ Dean of the College (if applicable) __________/_________

Signatures by the Dean of the Faculty, Controller and the Dean of Strategic Planning & Academic Resources authorize the Office of Corporate, Foundation & Government Relations to submit this proposal through NSF FastLane, Grants.gov, or another online system.