



NOTE: IF THIS IS A GRANT PLEASE ATTACH THE PROPOSAL APPROVAL AND ROUTING FORM (PARF).

Action Date:

PROJECT INFORMATION

Principal Investigator Name:	First:	Last:
Campus Phone:	Email:	
Co-Investigator Name:	First:	Last:
Campus Phone:	Email:	
Co-Investigator Name:	First:	Last:
Campus Phone:	Email:	
Title of Proposal:		
Brief Non-Technical Description:		

Agency:

Start Date:	End Date:
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Project Type (Choose One)	Project Category (Choose One)	Sponsor Type (Choose One)
New Project	Research Basic	Federal
Renewal	Research Applied	State
Supplement	Development	Local Government
Resubmission	Program/Curriculum Dev.	Business Grant (not Gift)
Revised Proposal	Conference/Workshop	Non-Government R&D
Amendment	Equipment	Fee for Service (Ballast)
	Student Services	Foundation
	Ballast Water	Foreign

If project is NOT NEW supply fund and department number:

COMPLIANCE

This is a Grant	Contract	Cooperative Agreement	Subcontract
This Agency has Reporting Requirements Yes No Other than Financial & Final Yes No			
This is a Collaboration with another Institution Yes No			
Working with an external agency, institutions or other party to perform a part of this project? Yes No			
IT Support Required Yes No			
Project involves creation of a course, new minor, new major, new program Yes No			
Any post-grant commitments Yes No			
Project may produce material eligible for patent or copyright Yes No			

PROJECT BUDGET

Budget Category	Budget
Direct Costs	
Facilities and Administration	
Total Project Costs	
Cost Share/Match	
Total Project Costs	

APPROVAL SIGNATURES

	Signature(s) Required	Date
Principal Investigator*		
Co-Investigator*		
RIO		
Chair		
Dean or Divisonal VP		
Provost		

*By signing I certify I have read and understand Cal Maritime's relevant policies and procedures and I understand the requirements of the award.