



SECTION 1: APPLICATION

The *Application* section is presented when the *Create Grant Application* action is initiated. Your responses to the following questions are used to create a new electronic application.

NOTE: An application type cannot be changed after the application is created. If you inadvertently create the wrong type of application, you must delete it and create a new one.

Question 1	
Text:	Please provide a name for your application.
Input Type:	Text
Required:	True
Description:	A non-unique name of your choosing that will allow you to distinguish this application from any other applications you create

Question 2	
Text:	Please select the type of grant you are applying for.
Input Type:	Drop-Down List (Single Selection)
Required:	True
Description:	The type of grant you are applying for. Options include: <ul style="list-style-type: none"> • General Campus Intercampus Exchange Grant • General Campus Research/Bridge Grant • General Campus Travel Grant • Health Sciences Research/Bridge Grant • Health Sciences Travel Grant • Marine Sciences Research/Bridge Grant • Marine Sciences Travel Grant

SECTION 2: PREPARER

The *Preparer* section enables you to indicate whether you are preparing the application on your own behalf, or whether you are preparing the application on behalf of another eligible grant recipient. In the latter case, you will also be asked to identify the applicant.

Question 1	
Text:	Are you preparing this application on behalf of someone other than yourself?
Input Type:	Radio Button
Required:	True
Description:	An indication of whether you are preparing the grant proposal for yourself or someone else. Options include: <ul style="list-style-type: none"> • Yes, I am preparing this proposal for someone else • No, I am preparing this proposal for myself



Question 2	
Conditional (Yes, I am preparing this proposal for someone else)	
Text:	Please select the name of the applicant.
Input Type:	Autocomplete (Textbox with Filtered Result Options)
Required:	True
Description:	The name of the applicant. You may enter the applicant name as {last name} {first name} or {first name} {last name}, but the filtered results displayed below the text box will be shown as {first name} {last name}. Click on the target name in the filtered results to select the applicant.

SECTION 3: APPLICANT IDENTITY

The *Applicant Identity* section displays the name, title, and contact information for the applicant identified in the *Preparer* section. Depending upon the grant committee to which you are applying (General Campus, Health Sciences, or Marine Sciences), you will also be asked to upload a digital copy of your curriculum vitae or a list of relevant publications.

Question 1	
General Campus	
Text:	Please attach an abbreviated c.v. listing each of your publications produced during the past three years along with your most important earlier scholarly work
Input Type:	File Upload
Required:	True
Description:	A single document that includes your abbreviated c.v. along with a list of publications either produced during the past three years or constituting your most important earlier work. Maximum of two pages.
Health Sciences	
Text:	Please attach your c.v. in the current NIH “Biographical Sketch” format for sections on Personal Statement, Research and Professional Experience, Honors and Awards, and Contributions to Science. Please do not include current support, as these are in other parts of the application.
Input Type:	File Upload
Required:	True
Description:	A single document that includes c.v. in NIH Biographical Sketch format. Maximum of five pages.
Marine Sciences	
Text:	Please attach a listing of three to five recent or relevant publications.
Input Type:	File Upload
Required:	True
Description:	A single document identifying three to five of your research publications that are recent and/or relevant to your current or proposed project.



SECTION 4: AWARD HISTORY

The *Award History* section requires you indicate whether you have received an Academic Senate grant award in the past, and whether you have any current startup funding, intramural grants, or extramural grants. If you answer yes to any of these questions, you will be required to list each of your awards for the specified category.

Academic Senate Awards	
Text:	Do you have any Academic Senate awards?
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether you have received Academic Senate award funding. Options include:</p> <ul style="list-style-type: none"> • Yes, I have Academic Senate awards • No, I do not have any Academic Senate awards <p>If you select yes, you will be required to provide the following information about each of your Academic Senate awards:</p> <ul style="list-style-type: none"> • Award Year (Text): Four-digit year that you received the award • Amount (Currency): Dollar amount of the award • Project Title (Text): Title of the project for which you received the award • Project Outcome (Text): Description of how the award benefited your research

Startup Funds	
Text:	Do you have any startup contracts and grants?
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether you have startup contract and grant funding. Options include:</p> <ul style="list-style-type: none"> • Yes, I have startup contracts and grants • No, I do not have any startup contracts and grants <p>If you select yes, you will be required to provide the following information about each of your startup contracts and grants:</p> <ul style="list-style-type: none"> • Title (Text): Contract/Grant title • Funding Source (Text): Contract/Grant agency or organization • Amount (Currency): Dollar amount of the award • Start Date (Date): Date that the contract/grant began • End Date (Date): Date that the contract/grant ended or is expected to end • Explanation (Text): Explanation for how this contract/grant is unrelated to the project for which you are requesting Academic Senate funding



Intramural Grants	
Text:	Do you have any intramural contracts and grants?
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether you have intramural contract and grant funding. Options include:</p> <ul style="list-style-type: none">• Yes, I have intramural contracts and grants• No, I do not have any intramural contracts and grants <p>If you select yes, you will be required to provide the following information about each of your intramural contracts and grants:</p> <ul style="list-style-type: none">• Status (Drop-Down): Indication of whether this contract grant is current or pending• Title (Text): Contract/Grant title• Funding Source (Text): Contract/Grant agency or organization• Amount (Currency): Dollar amount of the award• Start Date (Date): Date that the contract/grant began• End Date (Date): Date that the contract/grant ended or is expected to end• Explanation (Text): Explanation for how this contract/grant is unrelated to the project for which you are requesting Academic Senate funding

Extramural Grants	
Text:	Do you have any extramural contracts and grants?
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether you have extramural contract and grant funding. Options include:</p> <ul style="list-style-type: none">• Yes, I have extramural contracts and grants• No, I do not have any extramural contracts and grants <p>If you select yes, you will be required to provide the following information about each of your extramural contracts and grants:</p> <ul style="list-style-type: none">• Status (Drop-Down): Indication of whether this contract grant is current or pending• Title (Text): Contract/Grant title• Funding Source (Text): Contract/Grant agency or organization• Amount (Currency): Dollar amount of the award• Start Date (Date): Date that the contract/grant began• End Date (Date): Date that the contract/grant ended or is expected to end• Explanation (Text): Explanation for how this contract/grant is unrelated to the project for which you are requesting Academic Senate funding



SECTION 5: PROJECT COLLABORATION

The *Project Collaboration* section requires you to specify whether the project for which you are requesting Academic Senate support is an individual project, or a collaboration involving multiple potential Academic Senate research grant applicants for the current fiscal year. As noted in the online application, whether you are requesting support for an individual or collaborative project has no bearing on the review process. This distinction provides an additional data point for long-term analytical purposes, and it allows subsequent applicants on a collaborative project to reuse immutable project compliance characteristics without having to reenter the information.

Question 1	
Text:	Please indicate whether you are requesting funds to support a collaborative research project that involves other grant-eligible investigators who have, or may, apply for Academic Senate funding for the same project during the current fiscal year. This information is used for data management purposes, and the number of concurrent proposals citing a collaborative project is not considered during the review process.
Input Type:	Radio Button
Required:	True
Description:	An indication of whether you are requesting financial support for an individual or collaborative research project. Options include: <ul style="list-style-type: none"> • Yes, I am requesting funds to support a collaborative research project • No, I am requesting funds to support an individual research project

Question 2	
Conditional (Yes, I am requesting funds to support)	
Text:	Please indicate whether you would like to create a new collaborative project or select an existing collaborative project.
Input Type:	Radio Button
Required:	True
Description:	An indication of whether you would like to create a new collaborative research project or reference an existing collaborative research project that was previously created by a co-investigator for the current fiscal year. Options include: <ul style="list-style-type: none"> • I would like to create a new collaborative project • I would like to select an existing collaborative project

NOTES ON PROJECT CREATION

1. A project is created in the system and associated with your application once you complete section 6 (*Project Description*).
2. You cannot change the project collaboration type once a project is associated with your application. If you need to change this information for any reason, you will have to delete the application and create a new one.



3. A collaborative project will be available for reference by co-investigators once you complete section 7 (*Project Compliance*) regardless of whether you have submitted your application for review.

COLLABORATIVE PROJECT SUGGESTIONS

1. Coordinate with your collaborative project co-investigators prior to creating your applications to agree on a project name and determine who will create the collaborative project.
2. Notify your collaborative project co-investigators once you have created a new collaborative project and completed the *Project Compliance* section of the application.

SECTION 6: PROJECT DESCRIPTION

The *Project Description* section requires you to provide (or select) a name for your project, upload a detailed project description, and submit an overview of your role in the project.

Question 1	
Text:	<p>Individual Project You have chosen to create a new individual project. What is the title of the project for which you are requesting funding?</p> <p>Collaborative Project – New You have chosen to create a new collaborative project that will be accessible to other investigators. All future proposals referencing this project will be routed for your approval to ensure that the applicants are members of your research cohort.</p> <p>Collaborative Project – Existing Proposal applicants collaborating on a common research project have the ability to reuse project-specific information once it has been created by a co-investigator. Please select the collaborative project for which you are requesting support.</p>
Input Type:	<p>Individual Project, Collaborative Project – New Textbox</p> <p>Collaborative Project – Existing Autocomplete (Textbox with Filtered Result Options)</p>
Required:	True
Description:	The name of your project. For new individual and collaborative projects, enter the project name in the textbox. For existing collaborative projects, begin typing your project name and select the correct option from the results list.

Question 2	
Text:	<p>General Campus, Marine Sciences Please attach a detailed description of the project, including: (1) a precise statement of the problem and key objectives, (2) the relation of this work to other</p>



	<p>research in the field, (3) the plans for the procedures, and (4) what kind of publication or creative contribution you would expect from the project.</p> <p>Health Sciences</p> <p>Please attach a detailed description of the project, including: (1) a precise statement of the problem and key objections, (2) the relation of this work to other research in the field, (3) the plans for the procedures, and (4) what kind of publication or creative contribution you would expect from the project. The description of the proposal must provide/include:</p> <ul style="list-style-type: none"> • Statement of hypothesis • Description of sample size including a power analysis calculation, if appropriate • Description of methods of statistical analyses <p>Literature citations</p>
Input Type:	File Upload
Required:	True
Description:	<p>A detailed description of your project.</p> <p>General Campus, Marine Sciences</p> <p>Maximum two pages.</p> <p>Health Sciences</p> <p>Maximum two pages in NIH format, plus one page for cited literature.</p>

Question 3	
Text:	Please describe your role in the project.
Input Type:	Textbox
Required:	True
Description:	A textual description of your role in the project.

SECTION 7: PROJECT COMPLIANCE

The *Project Compliance* section requires you to provide information about the use of human subjects, animal subjects, recombinant DNA/biohazards, and radioactive materials in your project. You will not complete this section if you selected an existing collaborative project in sections 5 and 6.

Human Subjects	
Text:	Does this project involve the use of human subjects (including the use of questionnaires, interviews, body fluids, and tissues?) If so, approval from the Human Subjects Committee must be obtained, and it is the responsibility of the applicant to maintain a copy of the approval letter.
Input Type:	Radio Button
Required:	True
Description:	An indication of whether your project involves the use of human subjects. Options



	<p>include:</p> <ul style="list-style-type: none"> • Yes, this project involves human subjects • No, this project does not involve human subjects <p>If you select yes, you will be required to provide the following information about your Human Subjects Committee approval:</p> <ul style="list-style-type: none"> • Approval Number (Text) • Approval Date (Date)
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Animal Subjects	
Text:	Does this project involve the use of animal subjects? If so, approval from the Animal Subjects Committee must be obtained, and it is the responsibility of the applicant to maintain a copy of the approval letter.
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether your project involves the use of animal subjects. Options include:</p> <ul style="list-style-type: none"> • Yes, this project involves animal subjects • No, this project does not involve animal subjects <p>If you select yes, you will be required to provide the following information about your Animal Subjects Committee approval:</p> <ul style="list-style-type: none"> • Approval Number (Text) • Approval Date (Date)

Recombinant DNA/Biohazards	
Text:	Does this project involve recombinant DNA research or biohazards? If so, it must be reviewed by the Biosafety Committee and it is the responsibility of the applicant to maintain a copy of the authorization form required by Environmental Health and Safety.
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether your project involves the use of recombinant DNA research or biohazards. Options include:</p> <ul style="list-style-type: none"> • Yes, this project involves recombinant DNA research or biohazards • No, this project does not involve recombinant DNA research or biohazards

Radioactive Materials	
Text:	Does this project involve the use of radioactive materials? If so, it must be approved by Environment Health and Safety.
Input Type:	Radio Button
Required:	True
Description:	An indication of whether your project involves the use of radioactive materials.



	<p>Options include:</p> <ul style="list-style-type: none"> • Yes, this project involves radioactive materials • No, this project does not involve radioactive materials <p>If you select yes, you will be required to provide the following information about your Environmental Health and Safety approval:</p> <ul style="list-style-type: none"> • Radioisotope Use Authorization (RUA) Approval Number (Text)
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SECTION 8: GENERAL INFORMATION

The *General Information* section requires you to provide general administrative and financial information about your project including your fund manager, proposed funding start date, discretionary funds, extramural agency grants, and the type of financial support you are seeking. **NOTE: The financial support type subsection is where you will indicate whether you are seeking startup or bridge funding.**

Fund Manager	
Text:	Please select the departmental fund manager who would be responsible for an award resulting from this proposal:
Input Type:	Autocomplete (Textbox with Filtered Result Options)
Required:	True
Description:	The name of your fund manager. You may enter your fund manager name as {last name} {first name} or {first name} {last name}, but the filtered results displayed below the text box will be shown as {first name} {last name}. Click on the target name in the filtered results to select your fund manager.

Funding Start Date	
Text:	Please specify your proposed funding start date; award funds must be expended within one year of this date:
Input Type:	Date
Required:	True
Description:	The date that you would like funding to begin if you are granted an award.

Discretionary Funds	
Part 1: Indication	
Text:	Do you have discretionary funds that may be applicable to this project?
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether you have discretionary funds that you can allocate to your project. Options include:</p> <ul style="list-style-type: none"> • Yes, I have discretionary funds • No, I do not have discretionary funds <p>If you select yes, you will be required to provide the following information about</p>



	<p>your discretionary funds:</p> <ul style="list-style-type: none"> • Approximate Amount (Currency)
Part 2: Clarification	
Text:	Please provide an explanation
Input Type:	Textbox
Required:	True
Description:	Either an explanation of why you have no discretionary funding available for your project or a description of the amount of funding you identified in part 1.

Extramural Agency Grants	
Text:	Have you applied for extramural agency grants to support the project for which you are requesting funding?
Input Type:	Radio Button
Required:	True
Description:	<p>An indication of whether you have applied for and/or received extramural agency funding <u>for this project</u>. Options include:</p> <ul style="list-style-type: none"> • Yes, I have applied for extramural agency grants • No, I have not applied for extramural agency grants <p>IF YES</p> <p>You will be required to provide the following information about each of the extramural agency applications you have submitted (minimum of one):</p> <ul style="list-style-type: none"> • Agency Name (Text): Contract/Grant agency or organization • Requested Amount (Currency): Dollar amount of your request • Announcement Date (Date): Date that you learned or expect to learn whether your application is or was approved <p>IF NO</p> <p>You will be required to provide an explanation for why you have not sought extramural funding for your project</p>

Financial Support Type	
Text:	<p>Academic Senate bridge funding awards enable the continuation of existing research activities, while seed funding awards allow researchers to launch new projects or pursue a significant course correction from an existing project. Bridge funding is restricted to faculty who, after several years of demonstrated research productivity, have lost extramural research grants. Although they have proposals in the review cycle, bridge funds would support continued research activities in the short term. An application for seed funding, or for a project leading the investigator in a new direction, should represent innovative currently unfunded projects or pilot studies that are likely to lead to extramural support. Please indicate which type of financial support you are requesting:</p>
Input Type:	Radio Button
Required:	True



Description:	<p>An indication of what type of financial support you are seeking for your project. Options include:</p> <ul style="list-style-type: none"> • Bridge funding for an existing project • Seed funding for a new project • Seed funding to significantly reorient an existing project • Other <p>IF BRIDGE FUNDING You will be required describe your current funding prospects and explain how Academic Senate bridge funding would benefit your project</p> <p>IF SEED FUNDING TO REORIENT AN EXISTING PROJECT You will be required to describe the new line of research you are pursuing and explain how it differs from your current project</p> <p>IF OTHER You will be required to explain how you intend to utilize an Academic Senate grant</p>
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Recommendation Letter	
General Campus, Health Sciences	
Text:	Please attach a recommendation letter from your department chair:
Input Type:	File Upload
Required:	False
Description:	<u>Only for eligible non-Senate investigators.</u> A recommendation letter from your department chair.

SECTION 9: USE OF FUNDS

The *Use of Funds* section requires you identify and prioritize the resources you plan to acquire using your Academic Senate funding. You may add zero or more request line items for each of the available categories (Graduate Student Researchers, Student or Staff Salaries, Supplies & Expenses, Permanent Equipment, and Travel). The total dollar amount of your request is automatically tallied as the sum of the line items in each funding category.

Graduate Student Researchers	
General Campus, Health Sciences	
Text:	Add one or more requests for funding to support a Graduate Student Researcher (GSR)
Input Type:	Sub-form (<i>Add Request</i> button)
Required:	false
Description:	To request funding for one or more graduate student researchers, you will need to provide the following information for each line item: <ul style="list-style-type: none"> • Student Name (Text) • Degree Status (Radio Button): Masters or PhD



	<ul style="list-style-type: none"> • Applicable Quarters (Checkbox List): Fall, Winter, Spring, Summer • Monthly Pay Ray (Currency) • Total Months on Project (Integer) • Percent Time (% as Integer): 1 to 100 • Benefits Rate (% as Integer): 0 to 100 • Appointment Step (Integer): >= 0 • Tuition Remission Amount (Currency): Optional • Justification/Duties (Text) • Priority (Integer): 1 to 10 priority of this line item request. The priority is used during the review process to guide award allocations when funding is limited.
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Student or Staff Salaries	
Text:	Add one or more requests for general assistance (lab assistants, work study, programmers, clerical, etc.)
Input Type:	Sub-form (<i>Add Request</i> button)
Required:	false
Description:	<p>To request funding for one or more student or staff employees, you will need to provide the following information for each line item:</p> <ul style="list-style-type: none"> • Position Title (Text) • Payment Cycle (Dropdown): Monthly, Hourly, or Other • Pay Rate (Currency): Rate of pay for each payment cycle • Total Payments (Integer): Total number of payment cycles • Percent Time (% as Integer): 1 to 100 • Benefits Rate (% as Integer): 0 to 100 • Justification/Duties (Text) • Priority (Integer): 1 to 10 priority of this line item request. The priority is used during the review process to guide award allocations when funding is limited.

Supplies & Expenses	
Text:	Add one or more requests for expendable supplies, including non-inventorial equipment
Input Type:	Sub-form (<i>Add Request</i> button)
Required:	false
Description:	<p>To request funding for one or more expendable supplies or expenses, you will need to provide the following information for each line item:</p> <ul style="list-style-type: none"> • Supply/Expense (Text): Descriptive name of the supply or expense • Justification (Text) • Supply/Expense Cost (Currency) • Priority (Integer): 1 to 10 priority of this line item request. The priority is used during the review process to guide award allocations when funding is limited.



Permanent Equipment	
Text:	Add one or more requests to purchase a piece of permanent equipment
Input Type:	Sub-form (<i>Add Request</i> button)
Required:	false
Description:	<p>To request funding for one or more pieces of permanent equipment, you will need to provide the following information for each line item:</p> <ul style="list-style-type: none"> • Equipment Description (Text): Descriptive name of the piece of permanent equipment • Name of Vendor (Text) • Quoted Price (Currency) • Amount Requested (Currency) • Justification (Text) • Written Quote File (File Upload): Consolidate multiple quote files into a single document attachment prior to upload. • Priority (Integer): 1 to 10 priority of this line item request. The priority is used during the review process to guide award allocations when funding is limited. <p>Additionally, you will need to indicate whether this piece of equipment will be used by research projects other than your own. Options include:</p> <ul style="list-style-type: none"> • Yes, other research projects will use the equipment • No, this equipment will only be used by my project <p>If yes, you will be asked to describe the nature and amount of financial contributions by other potential users of the equipment.</p>

Travel	
Text:	Add one or more requests to fund field travel (library study, museums, microfilm and photostats, etc.)
Input Type:	Sub-form (<i>Add Request</i> button)
Required:	false
Description:	<p>To request funding for one or more field travel excursions, you will need to provide the following information for each line item:</p> <ul style="list-style-type: none"> • Destination Type (Radio Button): Domestic or Foreign • Destination (Text) • Justification/Duties (Text) • Airfare Quote (Currency) • Per Diem Expenses (Currency) • Trip Duration (Integer): Number of days (maximum of 15) • Written Quote File (File Upload): Consolidate multiple quote files into a single document attachment prior to upload. • Priority (Integer): 1 to 10 priority of this line item request. The priority is used during the review process to guide award allocations when funding is limited.



Additionally, you have the option to provide a list of additional travel-related expenses. You will be required to provide the following information for each additional expense item that you add:

- **Expense (Text):** Descriptive name of the expense
- **Cost (Currency)**

SECTION 10: CONFIRMATION

The *Confirmation* section enables you to view all of your application responses in one screen prior to submission. You can jump to any section to make edits by clicking the Edit link in the top right corner of the section. There is an additional *Comments* section at the bottom of the confirmation screen that identifies the next recipient in the application approval hierarchy and allows you to provide a comment for that approver. If you are the applicant (i.e. not preparing the application for someone else), you will be required to check a box certifying that the information in your application is accurate and complete. You may then click the *Submit* button to formally submit your application.

NOTE: You are not required to prepare and submit your application in one session. You can leave your application in the draft state by clicking the Home link on the page title bar. The application will be listed in the *Drafts* application queue on the eGrants home page, and the Edit option will be available until the application is submitted.