

Department of Atmospheric Sciences PROPOSAL INTAKE FORM

Email to ATMGrant@uw.edu, requested 6 weeks prior to sponsor deadline as complete as possible. Thank you!

PI: _____ Deadline: _____ Target Deadline
 Sponsor Deadline
 Pre-Application/Notice of Intent deadline: _____
 Solicitation/FOA or Sponsor (copy & paste link): _____
 Full Project Title: _____
 How you will refer to this project (in no more than 15 characters): _____
 Start Date: _____ End Date: _____ Total Cost Target: _____
 Collaborative Proposal – member organizations: _____
 Primary application will be submitted by other PI/Institution — Deadline for UW: _____
 Primary Institution: _____
 Primary PI: _____ Email: _____
 Admin contact: _____ Email: _____
 Additional Info/Comments: _____

BUDGET ITEMS – Either complete section below OR send budget spreadsheet with Intake Form

Personnel¹:

Name	Job Class/Role	SAGE FCOI ²	# Months / which Year(s)	AY	SUM	Tuition
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹Computing charges will be applied based on number of personnel each year

²ID all persons “responsible for the design, conduct, or reporting of research”, required to disclose financial conflicts

Traveller	Event/Destination	Month/Project Year	Days
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other significant travel costs: _____

	Item(s)	Years	Cost/Year	Total Cost
Supplies (<\$5k/item, incl. computers):	_____	_____	_____	_____
Equipment (>\$5k per item):	_____	_____	_____	_____
Publication costs:	_____	_____	_____	_____
Other:	_____	_____	_____	_____
Other:	_____	_____	_____	_____

Department of Atmospheric Sciences
INTAKE FORM CONTINUED: OUTGOING SUBAWARDS

INFORMATION NEEDED FOR SUBAWARDS

Ignore if not relevant to this project

In order to secure all required subaward documents (listed below), please provide as much info as possible for subawards and indicate whether or not PI would like Grants Team to initiate contact with subawardee.

- PI will contact subawardee, cc'ing ATMGrant@uw.edu
- PI would like Grants Team to initiate contact with:
 - Consortium PI(s)
 - Admin contact(s)
 - Both

Subcontract/Subawards*

1. Institution: _____
Consortium PI: _____ Email: _____
Admin Contact: _____ Email: _____
Expected costs/budget limitations: _____
2. Institution: _____
Consortium PI: _____ Email: _____
Admin Contact: _____ Email: _____
Expected costs/budget limitations: _____
3. Institution: _____
Consortium PI: _____ Email: _____
Admin Contact: _____ Email: _____
Expected costs/budget limitations: _____

*If more than 3 subawards, please provide requested info in an email to ATMGrant@uw.edu

Documents required from each subawardee at least TWO WEEKS prior to deadline:

- Subaward budget (in the sponsor's form if possible)
- Subaward budget justification
- Subaward Scope of Work (SOW)
- Subaward Letter of Intent (LOI) with institutional concurrence
- Bio/CVs for all Key Personnel as required by specific sponsor and solicitation
- Any other information or documents required by sponsor/solicitation (such as Current & Pending Support, Conflicts of Interest, Collaborators & Affiliations, etc.)