

# KENTUCKY NSF EPSCoR REG COVER SHEET

The applicant and the Authorized Organizational Representative (AOR) should sign this cover sheet. The proposal should be prepared in accordance with the program's respective solicitation. Note that this coversheet and the associated budget sheet(s) require original signatures. An original coversheet with signatures can be mailed to the KY NSF EPSCoR office after electronic submission of the entire proposal. A full electronic version of the proposal (which must be a single "PDF" document), must be sent electronically as an email attachment to: [epscor@uky.edu](mailto:epscor@uky.edu) by the program due date.

## KY NSF EPSCoR Program to which I am applying:

Research Enhancement Grant                       Research Enhancement Grant Instrumentation

## PRINCIPAL INVESTIGATOR INFORMATION:

NAME: \_\_\_\_\_  
TITLE: \_\_\_\_\_  
COLLEGE/UNIVERSITY: \_\_\_\_\_  
DEPARTMENT: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP: \_\_\_\_\_  
TELEPHONE NUMBER: \_\_\_\_\_  
FAX NUMBER: \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ESTIMATED LENGTH OF AWARD: \_\_\_\_\_  
YEAR OF PH.D RECEIPT: \_\_\_\_\_

## PROPOSAL INFORMATION:

PROJECT TITLE: \_\_\_\_\_  
EPSCOR FUNDS REQUESTED: \_\_\_\_\_  
COST SHARING COMMITMENTS: \_\_\_\_\_  
TOTAL PROJECT COSTS: \_\_\_\_\_

**RESEARCH FOCUS AREA – CHOOSE ONE:**     MATERIAL SCIENCE & ADVANCED MFG.     ENVIRONMENTAL & ENERGY TECHNOLOGY  
 HUMAN HEALTH & DEVELOPMENT                       INFORMATION TECHNOLOGY & COMMUNICATIONS  
 BIOSCIENCES                       OTHER

DOES THE RESEARCH INVOLVE HUMAN SUBJECTS?    \_\_\_\_\_ Yes    \_\_\_\_\_ No    IF YES, IRB APPROVAL?    \_\_\_\_\_ Yes    \_\_\_\_\_ No

DOES THE RESEARCH INVOLVE VERTEBRATE ANIMALS?    \_\_\_\_\_ Yes    \_\_\_\_\_ No    IF YES, IACUC APPROVAL?    \_\_\_\_\_ Yes    \_\_\_\_\_ No

**PI SIGNATURE:** \_\_\_\_\_                      **DATE:** \_\_\_\_\_

By signing above, I attest to the truthfulness of the information contained within the proposal.

## AUTHORIZED ORGANIZATIONAL REPRESENTATIVE (AOR\*):

NAME: \_\_\_\_\_  
TITLE: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP: \_\_\_\_\_  
TELEPHONE NUMBER: \_\_\_\_\_  
FAX NUMBER: \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

**AOR SIGNATURE:** \_\_\_\_\_                      **DATE:** \_\_\_\_\_

\*The AOR is responsible for administering the KY NSF EPSCoR award at the PI's institution. Typically this is a representative from the Grants Accounting/Administrative Office. The AOR is responsible for assuring the proposal's compliance with applicable federal cost principles as well as providing all required administrative correspondence (e.g., billing, cost share reporting, etc.).