UNM HEALTH SCIENCES CENTER PROPOSAL DATA SHEET (PDS) (INTERNAL USE ONLY)

**PROPOSAL #**  
**HSC-**

<table>
<thead>
<tr>
<th>DEPARTMENT (Lead department if multiple departments)</th>
<th>PIs ORG CODE</th>
<th>CURRENT INDEX#</th>
<th>CURRENT FUND#</th>
</tr>
</thead>
</table>

**Principal Investigator (PI)**  

**Co-PI (If more than one, attach sheet)**

**Department Contact**

**Agency:** (sponsor/company/collaborator)

<table>
<thead>
<tr>
<th>SOLICITATION NUMBER or PROGRAM NAME</th>
<th>DATE PROPOSAL IS DUE TO AGENCY:</th>
</tr>
</thead>
</table>

**Project Title**

**Does this Project Serve:**  
- [ ] Native Americans  
- [ ] Hispanics  
- [ ] Other Underserved Populations

**This Action Is** (Select One):  
- [ ] Supplement  
- [ ] Transfer  
- [ ] New  
- [ ] Competing Renewal  
- [ ] Continuation  
- [ ] Revision to #______

**Proposal/Project Classifications**

<table>
<thead>
<tr>
<th>Type: (Select One)</th>
<th>Category: (Select One)</th>
<th>Location: (Select One)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grant</td>
<td>Research</td>
<td>On Campus</td>
</tr>
<tr>
<td>Cooperative Agreement</td>
<td>Other - Public Service</td>
<td>Off Campus</td>
</tr>
<tr>
<td>Clinical Trial</td>
<td>Instruction</td>
<td>Location:</td>
</tr>
<tr>
<td>Contract</td>
<td>Training</td>
<td></td>
</tr>
<tr>
<td>Subaward – originating sponsor is ______</td>
<td>Fellowship</td>
<td></td>
</tr>
</tbody>
</table>

**Costs for Initial or New Budget Period:**

- **Direct Costs**
  - From ______ To ______
  - **$ 0**
- **F&A Rate:** 50%
- **F&A Costs**
  - **$ 0**

**Total for Budget Period** **$ 0**

**Costs for Entire Project:** (Award Cycle)

- From ______ To ______
- **Total for Entire Project** **$ 0**

**Clinical Trials Only:**

<table>
<thead>
<tr>
<th>FDA Phase</th>
<th>Multi Center Study</th>
<th>Inventions are Anticipated</th>
<th>PI Waives Intellectual Property Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] I</td>
<td>[ ] YES</td>
<td>[ ] YES</td>
<td>[ ] YES</td>
</tr>
<tr>
<td>[ ] II</td>
<td>[ ] NO</td>
<td>[ ] NO</td>
<td>[ ] NO</td>
</tr>
<tr>
<td>[ ] III</td>
<td>[ ] NO</td>
<td>[ ] NO</td>
<td>[ ] NO</td>
</tr>
<tr>
<td>[ ] IV</td>
<td>[ ] NO</td>
<td>[ ] NO</td>
<td>[ ] NO</td>
</tr>
<tr>
<td>[ ] Multi Center Study</td>
<td>[ ] YES</td>
<td>[ ] YES</td>
<td>[ ] YES</td>
</tr>
</tbody>
</table>

**Enrollment Start Date:** ______  
**Inventions are Anticipated:** [ ] YES  
**PI Waives Intellectual Property Ownership:** [ ] YES  
**List Country:** ______

**Faculty Activity Database (FAD) – SOM Only (Select One):**

<table>
<thead>
<tr>
<th>Research</th>
<th>Clinical</th>
<th>Education</th>
<th>Non Mission Specific</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ]</td>
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</tr>
</tbody>
</table>

**If this Proposal Involves Items Listed Below, Check All Box(es) That Apply. See PI Guide or Links for Additional Information:**

- [ ] Human Subjects  
- [ ] Laboratory Animals  
- [ ] Subcontractors  
- [ ] Consultants  
- [VA Employees]  
- [ ] Other UNM Colleges / Facilities
- [ ] Cost Share or Matching Funds
- [ ] Requires Building Modifications
- [ ] Proprietary, Classified or Sensitive Information
- [ ] Recombinant DNA, Radioactive/Hazardous Materials or Waste – Contact Safety Officer
- [ ] Export Control Select Agents
- [ ] Foreign National UNM Personnel
- [ ] UNM Personnel with Dual Citizennships
- [ ] Foreign Collaborators
- [ ] Restrictions on Publications
- [ ] Funding from Foreign-Owned Agency/Company
- [ ] Foreign Travel
- [ ] List Country: ______

**In signing this document, the PI and Chair do hereby agree that all information contained within the application/proposal is true, complete and accurate to the best of their knowledge. The department hereby accepts all responsibility for the budget, cost share commitments, F&A split agreement(s), authorizations for use of UH, Mind Imaging, Cancer Center, and Library facilities, curriculum changes, the cost of required building modifications, and coordination with other UNM departments, Consultants, Collaborators, and Subcontractors, involved with this project. The PI and Chair also agree to secure HRRC & AFR approvals prior to beginning the research and will work with industrial security to develop a compliance plan for export control. If applicable, the PI accepts responsibility for the scientific conduct of the project, submission of the required progress reports, compliance with federal regulations prohibiting debarred/suspended personnel from participating on federally funded projects, and hereby acknowledges that any false, fictitious, or fraudulent statements or claims made in this proposal/application may subject the PI to criminal, civil, or administrative penalties.**

**Signature of PI**  
**Date**

**Signature of PI's Chair**  
**Date**