

# Office of Sponsored Projects - Contract Intake Form

*This completed CONTRACT INTAKE FORM, along with complete applicable documentation, must be received by the Office of Sponsored Projects a minimum of ten (10) working days prior to an agency deadline in order to allow review and processing for institutional signatures.*

Date:

Principal Investigator:

Department:

Phone:

Email:

Co-PIs:

## Contracting Agency Information

Agency Name:

Agency Contact Information

Type of Entity:

Name:

DUNS:

Address:

Phone:

Email:

## Project Information

Project Title:

Status:

*If revision/extension:*

OSP ID of Project:

PI is

Providing

Receiving goods or services.

Project Term: Start Date

End Date

Total Budget Amount:

Project Income:

Cost Share:

Indirect Costs Included in Budget:

*If less than our current negotiated rate please provide relevant justification:*

Location of Service:

On Campus

Off Campus

*If off campus please provide project site:*

Statement of Work:

Budget Justification: