

Office of Research-Sponsored Projects

INFORMATION SHEET

ORBIT Record Number: _____

Today's Date: _____	Actual/Requested Deadline: -Please write a numerical date on at least one of the lines provided. -Do not write "ASAP", "soon", etc. -If no date is provided, the action will receive a standard five working day review.
Analyst: _____	
Officer: _____	
Liaison: _____	Sponsor Deadline Date: _____
PI: _____	Dept. Requested Submission Date*: _____
	*Add justification in comments section below.

PROPOSAL ACTIONS (Please include any guidelines or written communications from the sponsor.)
<input type="checkbox"/> Pre-review Copy (One complete copy of proposal and data sheet)
<input type="checkbox"/> Back-in Pre-review Copy
<input type="checkbox"/> Copy of Sponsor Guidelines/Email from Program Officer <input type="checkbox"/> Includes RFP/RFQ

POST PROPOSAL SUBMISSION ACTIONS
<input type="checkbox"/> Revised Budget
<input type="checkbox"/> Proposal File update/Just in Time (JIT)
<input type="checkbox"/> Request for Approval to Spend Funds (RAS)

AWARD ACTIONS
<input type="checkbox"/> Award Document/Modification (Received by Department)
<input type="checkbox"/> Hard Copy Finals

POST AWARD ACTIONS
<input type="checkbox"/> No-Cost Extension (NCE)
<input type="checkbox"/> Other Sponsor Prior Approval Request
<input type="checkbox"/> Revised Budget

SUBAWARD/MULTI-CAMPUS ACTIONS: (KK/MC Number: _____)
<input type="checkbox"/> Part B Form
<input type="checkbox"/> Close-out Certification/Final Invoice

OTHER ACTIONS: _____

SUBMISSION METHODS
To be submitted by: <input type="checkbox"/> SPO <input type="checkbox"/> Department Via: <input type="checkbox"/> Cayuse <input type="checkbox"/> FastLane <input type="checkbox"/> Other: _____
Special Instructions for Submission: _____

COMMENTS: _____

