

**Office of Sponsored Programs**

1570 Baltimore Pike

Lincoln University, PA 19352

**484-365-7234** phone

**484-365-7691** fax

osp@lincoln.edu

(Sponsored Program is operationally defined as Grants, Contracts, & Cooperative Agreements)

**Intent to Develop & Submit a Proposal for Funding Opportunities**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | New |  | Resubmit |  | Other (please indicate): |  | |
|  |  |  |  |  |  |  |  |
|  | Grant |  | Contract |  | Cooperative Agreement |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Today’s Date:** |  | | |  | **Funding Agency’s Submission Deadline:** | | |  |
| **Funding Agency:** | |  | | | |  | **Solicitation #:** |  |
| **Name of Appropriate Program Officer:** | | |  | | | | | |
| **Program Officer Contact Information:** | | |  | | | | | |
|  | | |  | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PROSPECTIVE PRINCIPAL INVESTIGATOR (PI):** | |  | | | |
| **CONTACT TELEPHONE#** |  | |  | **E-MAIL:** |  |
| **DEPARTMENT / OFFICE:** |  | |  | **DIVISION:** |  |

**Brief description of the proposed project:**

|  |  |  |
| --- | --- | --- |
| **PROJECTED DATE OF SUBMISSION OF *COMPLETE DRAFT* TO OSP FOR INTERNAL TLU REVIEW:** |  |  |
| (Note: This date should be at least 5 business days before the Funding Agency’s Submission Deadline above.) | | |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| **Prospective PI** |  | **Date** |  | **Departmental Chairperson / Supervisor** |  | **Date** |
|  |  |  |  |  |  |  |
| **Dean of Faculty** |  | **Date** |  | **Director, Sponsored Programs** |  | **Date** |