

Child Health Research Proposal Questionnaire

Final documents due to SOM:

*Required field

Primary Sponsor Agency: _____

PI: _____ Sponsor Due Date of Proposal: _____

Proposal Title*: _____

Project Start Date*: _____ Project End Date*: _____ Duration of Project*: _____

Link to Funding Opportunity Announcement*: _____

Keywords (2)*: _____

Proposal Type: New Renewal Continuation Supplemental Amendment Pre-Proposal

Sponsor Type: Federal State Industry Other: _____

Is MU a subcontract on the project? Yes No

If yes, provide Pass-Through Entity (PTE) Institution information: (Attach additional sheet for multiple subcontracts)

Institution Name: _____

Institution

Project PI: _____ Email: _____

Grants

Contact Name: _____ Email: _____

Anticipated MU Personnel: (Attach additional sheet if needed)

Name	Project Role	eRA Commons ID	% Effort	% Shared Credit (Must total 100%)

F&A Rate: On Campus Research 56.5% Other: (Please Specify) _____

Will your budget include a subcontract(s)?* Yes No

If yes, provide institution name(s), contact name(s), and email(s). For more than one subcontract, attach additional sheets.

Institution

Name: _____

Contact

Name: _____ Email: _____

MU PS Checklist (Check all that apply)*:

This project involves the use of **Animals**. (See reference page for more information)

This project involves the use of **Human Tissue** or other samples. (See reference page for more information)

This project is considered a **Clinical Trial**. (See reference page for more information)

This project involves the use of **human Embryonic Stem Cells (hESC)**. (See reference page for more information)

The project involves any entity (sponsor, collaborators, consultants, suppliers, etc.) **outside** the United States.

The project involves travel to or shipping of materials to destinations **outside** of the United States.

The project involves the use of products that are not considered Federally legal.

Proposal Questionnaire

This is a Multi-UM Campus project.

This project is related to a University License or assigned patent.

The proposed project will produce discoveries or inventions that may result in a patent.

Space that does not currently exist will be required for this project.

Sponsor proprietary information will be provided by the sponsor in support of the scope.

This proposal is related to a previous proposal.

If yes, list original proposal ID#:

This project requires computing, data storage, or data networking capabilities exceeding those of routine desktop computing.

This work will involve MU Extension personnel or one or more of the county Extension offices.

Please check all Research Core Facilities this project will utilize:

Cell & Immunobiology

DNA Core

Electron Microscopy

Informatics Core

Molecular Cytology

NMR Facility

Proteomics Center

Molecular Interactions

Animal Modeling Core

Plant Transformation

Metabolomics Core

Cognitive Neuroscience Systems

X-Ray Microanalysis

Laboratory for Infectious Disease Research

The major goal(s) of the project is (are)*:

Additional Notes:

Important:

Proposals including a subcontract should include the total cost of each subaward as soon as possible.

Note: Fringe rates run concurrent with the Institutional Fiscal Year July 1 – June 30

FY23 34.05% FY24 35.07% FY25 36.12%

FY26 37.21% FY27 38.32% FY28 39.47%

References

All submissions requiring the use of animal information, tissues, fluids, etc., require the MU ACUC protocol:

<https://ecompliance.missouri.edu/acuc>

All submissions requiring the use of human information, tissue, fluids, etc., require the MU IRB form:

<https://ecompliance.missouri.edu/my/irb/reviews/new>

Clinical trial information:

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