Proposal Preparation Fund (PPF)



University of Kansas Office of Research 2385 Irving Hill Rd Lawrence, KS 66045-7568 Telephone: 785-864-3441 Fax: 785-864-5042

www.research.ku.edu

Please submit one copy of this application to <u>RGSPPF@ku.edu</u> at least three (3) working weeks prior to the agency deadline for submission of the proposal.

If you have questions about the PPF program, please consult the KU Policy Library http://policy.ku.edu/research/proposal-prep-institutional-support or contact Nancy Biles (864-7434, rgsppf@ku.edu).

Date:	
PI Name:	Title:
Phone:	Email address:
Department/Unit:	Chairperson/Director:

By submitting this form, you are certifying that the information included is complete and accurate.

Please use the space below to outline your PPF request.

Please list all persons who are 100% grant and/or cost-share committed, for whom support is being requested.

(1)	(2)		(3)	(4)	(5)	(6)
Name and Tile of Individual		Requested port End	% time to be supported by PPF	Salary and Fringe Benefits Requested Biweekly rate X number of biweeks X percentage plus 35% faculty/staff fringe benefits rate	Current Appointment KUCR project number(s) and percent effort allocated to each	Current Cost Share Commitments KUCR project number(s) and percent effort allocated to each
Ima Jayhawk Research Associate Professor	01/01/2015	01/14/2015	100%	Salary \$3000 X 1 X 100% = \$3000 Fringe \$3000 X 35% = \$1050 Total = \$4050	NIH12345 – 50% NSF 12345-25%	KAN12345-25%
			Total Funds Requested			

Planned Proposal for which PPF Funds are being requested:

Sponsor/Funding Agency and Flow-through Sponsor (if applicable)::
Funding Opportunity Number or Program Title:
Project Submission Deadline:
Proposed project duration yrs.
Estimated Proposal Budget:
Brief description of Proposal:
Rationale: Briefly explain each individual's role with reference to their expertise in the project.
Are funds available through your Department, Program, School or Research Center for this purpose? Yes No Please explain your answer below:
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