

University of Northern Iowa  
Proposal Routing and Approval Form

PRAF Number: 834  
RSP Staff Assisting:  
Submission Type: Preliminary

### Investigator Information

Principal Investigator/Project Director (PI/PD):

PI's Department:

Email:

Phone:

Mail Code:

Department Responsible for Oversight:

Course Release: -- Yes -- No

Co-Principal Investigator(s)/Co-Project Director(s) (UNI only)

No Co-PI(s)/Co-PD(s) specified

**Proposal Information**

**Resubmission:**  
**Proposal Type:**  
**Project Title:**  
**Total Project Period:** From: To:  
**Agreement Type:**  
**Sponsor/Agency:**  
**Foreign Source:**  
**If subaward proposal - sponsor's sponsor :**  
**Funding Opportunity/Program Title:**  
**Sponsor's Deadline:** Date: Time (Central):  
**Type of Deadline:**  
**Submission Method:**  
**Submission Responsibility:**  
**Project Function:**  
**Involve:** -- Pre-k-12 education -- Inter-disciplinary collaboration

**Budget Information**

Budget Totals:	Budget Periods:		Facilities and Administrative (Indirect) Costs:
	First Year	Total Years	
1) Direct Costs	\$0.00	\$0.00	F&A Rate: null%
2) F&A (Indirect) Costs	\$0.00	\$0.00	Base: -- MTDC -- TDC -- Other
3) Total Requested of Sponsor (1+2)	\$0.00	\$0.00	F&A Reduction Reason: --
4) Total Cost Share/Match Commitment	\$0.00	\$0.00	
5) Total Project Costs(3+4)	\$0.00	\$0.00	

**Does the budget include funds for subaward(s)/subcontract(s)?** Yes No

**Will this project generate income?** Yes No

**Does the budget include cost share/match?** Yes No

**Attachment Information**

**Scope of Work/Project Abstract:**

**Budget:**

**Budget Narrative:**

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**Other Attached Documents:**

**Workflow Steps**

Description	Notification Type	Approver	Completion Date
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**Workflow History**

Action Date	Status	Comment	Action Taken By
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