ORSP Contact: Choose an ORSP Lead
Agency Deadline Date and Time:

ORSP Routing Form

A complete proposal must be submitted to the Office for Research and Sponsored Projects five days in advance of the application deadline.

1. Applicant Information

LMU Applicant: ___________________________ Role: Principal Investigator (PI)
LMU Department: ___________________________ Email: ___________________________
Primary Institution: ___________________________

Project Title: __________________________________________

Project Description: (Please see abstract/summary or statement of work...)

Activity Type: Choose an Activity Type Agreement Type: Choose an Agreement Type
Start Date: ___________________________ End Date: ___________________________

2. Budget Summary

No substantial changes may be made to the project and budget subsequent to obtaining the required approvals.

<table>
<thead>
<tr>
<th>Total Project Period Budget</th>
<th>Rate Exclusions or Waivers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Costs Requested</td>
<td>$</td>
</tr>
<tr>
<td>Indirect (F&amp;A) Costs Requested</td>
<td>$</td>
</tr>
<tr>
<td>Total Costs Requested</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Institutional Commitment    | $                           | ___________________________

3. Agency Information

Prime: ___________________________ Prime Type: Choose a Prime Type
Funding Agency: ___________________________ Agency Type: Choose an Agency Type
Agency Program: ___________________________ Proposal Type: Choose a Proposal Type
Program No.: ___________________________ CFDA No.: ___________________________
URL: ____________________________________

Revised June 2018
4. Project/Program Information

☐ Y ☐ N
☐ ☐ Reassigned Time:
☐ ☐ Additional Personnel/Consultants/Students:
☐ ☐ Subrecipient Organization(s):
☐ ☐ Computing and/or Software Request:
☐ ☐ LMU Existing Equipment:
☐ ☐ New Office Space/Modifications/Housing:
☐ ☐ Agreement or collaboration with a foreign entity, person, or employment of foreign nationals:
☐ ☐ Shipment of equipment, materials or data outside the United States:
☐ ☐ Involvement of proprietary or confidential information or materials from the sponsor or any third party:
☐ ☐ International Travel:
☐ ☐ Human Subjects
☐ ☐ Animals Involved as Experimental Subjects
☐ ☐ Hazardous Materials:

5. Summary of Compliance Information

My signature below attests that the information in the application is true and accurate and I have reviewed the routing package. I attest and agree to the following:

- If the proposed project produces a conflict of interest (financial, managerial, of commitment or other), I am aware of the Conflict of Interest Disclosure policies of the University and sponsor, and have completed a disclosure form(s), if necessary.
- If the proposed project involves human subjects, I understand that an IRB Protocol or Application for Exemption must be submitted prior to the receipt of funding.
- If the proposed project involves animals as experimental subjects, I understand that an IACUC Protocol or Application for Exemption must be submitted prior to the receipt of funding.
- If the proposed project involves hazardous materials, I am aware of LMU’s policy of handling hazardous materials, including the disposal of sharps and chemical and radioactive waste.

LMU Applicant ____________________________ Date __________

6. Approvals

Department Chair ____________________________ Date __________

Associate Dean ____________________________ Date __________

Associate Provost ____________________________ Date __________

Kathleen Weaver