



External Grant Approval (GAF)

Office of Sponsored Projects

Station 2 | 1500 S Ave K | Portales, NM 88130

Phone: 575.562.4172 | Fax: 575.562.4305

Required for all grant proposals, including partnerships and delivery of service.

Checklist

This form must be submitted for approval for external grant proposals, regardless of the nature of the proposal, the funding agency or the amount of funding being requested. Only approved obligations/commitments will be honored by the University.

- Proposal with budget is attached to this form for signature approval.
- Obligations and commitments expected of the University are clearly defined in the proposal.
- I understand all deliverables and official reports must be submitted to the Office of Sponsored Projects.
- External partners/ENMU units providing resources (e.g., people, facilities, funding) for this grant have approved the proposal.
- It is understood that approved grant funding cannot be accepted or declined without University approval.

This proposal is: New Renewal Continuation Revision

No additional commitments can be made on behalf of the University other than those approved through this form without specific prior approval. The proposal's budget must be provided to the Office of Sponsored Projects a minimum of 10 working days before grant submittal. The GAF with the attached proposal must be provided to the Office of Sponsored Projects a minimum of five working days before proposal submission.

Grant Information

Title of project: _____

Today's date: _____ Proposal deadline date: _____ Postmarked Due at agency

Grant period: _____ to _____

Project director 1: Name: _____ Department: _____

Project director 2: Name: _____ Department: _____

Funding agency: _____

Budget: Total requested from agency: \$ _____ Total requested of ENMU: \$ _____

Indirect cost: \$ _____; _____% of Direct costs Salaries and wages Allowable

ENMU will (check all that apply): Receive funds Offer in-kind support
 Deliver services/commitments only (e.g., classes, training)

This is a: Departmental grant Individual grant External partnership(s)

ENMU is serving as: Primary recipient Partner/secondary recipient Fiscal agent

Details

Cost share/match is included in budget? Yes No

Cost share/match is mandatory? Yes No

Reassigned/Release time is requested? Yes No

Additional personnel requested such as faculty, staff or students? Yes No

Will outside contractors be used, including evaluators? Yes No

Equipment and/or computer/printers are requested? (If yes, see equipment section below.) Yes No

Additional space or facilities required? (If yes, please attach description.) Yes No

Remodeling of space required? (If yes, please attach description.) Yes No

Project involves the use of human subjects? Yes No

Date submitted to Human Subjects Protection Committee: _____

Approval No.: _____

Project involves the use of laboratory animals? Yes No

If yes, which species: _____

Date submitted to Institutional Animal Care and Use Committee: _____

Approval No.: _____

Project contains potentially patentable ideas or other intellectual property, e.g., software, etc.? Yes No

If yes, please attach patent form.

Project involves any unusual hazards? Yes No

If yes, please attach description.

Project poses possible actual or perceived conflict of interest? Yes No

If yes, please attach description.

Project director 1 printed name Project director 1 signature Date

Project director 2 printed name Project director 2 signature Date

Equipment/Computers/Printers for Grant

If equipment/computers/printers are being purchased from this grant, what budget will support operation and maintenance after the expiration of the grant? Please note: All computers and printers must have pre-approval; contact Information Technology Services at 575.562.4352 for approval information.

Budget source: _____

Who will provide maintenance after grant period ends? _____

CIO printed name CIO signature Date

Approval Signatures

The project director obtains the signature of the chair(s). The Office of Sponsored Projects obtains the remaining signatures. If the grant project involves other departments/unit(s), signatures must be obtained from all appropriate chairs/deans/vice presidents indicating approval of the proposed project.

Chair printed name Chair signature Date

Dean printed name Dean signature Date

Foundation representative printed name Foundation representative signature Date

Office of Sponsored Projects, manager printed name Office of Sponsored Projects, manager signature Date

Vice president 1 printed name Vice president 1 signature Date

Vice president 2 printed name Vice president 2 signature Date



Budget Summary

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Title of project: _____

Budget: Total requested from agency: \$ _____ Total requested of ENMU: \$ _____

Indirect cost: \$ _____; _____% of Direct costs Salaries and wages Allowable

Total ENMU funds committed: \$ _____

Budget Summary

	Funding Agency	ENMU	Other	Comments
PI, Co-PI, Faculty Salary (FA/SP)				
PI, Co-PI, Faculty Salary (SU)				
Student Salary (FA/SP)				
Student Salary (SU)				
Fringe Benefits				
Conferences/Workshops				
Contractors/Evaluators Fees				
Equipment >\$2000				
Supplies & Materials				
Travel: Staff, in-state				
Travel: Staff, out-of-state				
Travel: Project Participants				
Other:				
Other:				
Other:				
Other:				
Indirect Costs				
Total				