

# Sponsored Programs Office

## DATA SHEET FOR CONTRACT AND GRANT PROPOSAL OR SERVICE AGREEMENT REQUESTS



This form and the instructions for completing it are on the [Forms](#) page of the Office of Research website

Deliver/mail form to:

For SPO Use Only:

**Sponsored Programs Office,  
1850 Research Park Drive, Suite 300,  
University of California, Davis, CA 95618**

Institution No:	
Date to EH&S :	
Date to COL:	
Date to EMA:	

**To avoid delays in processing, please complete the Data Sheet in its entirety.**

### 1. Type of Request (Please check only one):

☐ **Contract and Grant Proposal**      ☐ **Service Agreement** – UCD is providing a service for an outside entity (Also Complete Exhibit A)

Sponsor Deadline, if any: Date:

Davis local time:

☐ Postmark Date

☐ Receipt Date

**\*\* SPO Requires five business  
days for a full review \*\***

Electronic Submission:      ☐ No      ☐ Yes (Please provide website)

### 2. Principal Investigator(PI)/Project Director (PD) Information

Name (first, middle, last):

Payroll Title:

Employee ID:

Phone:

Fax:

E-mail:

### 3. Administering Department/Unit Information

Administering Department Name:

Pickup Contact Name:

Phone Number:

Department Financial Contact Name:

E-Mail:

Telephone:

Fax:

### 4. Sponsor/Other Party Information

Sponsor /Other Party Name (indicate the name of the organization which will directly provide funding to UC Davis):

Address:

Attn:

Phone:

Fax:

E-mail:

Has the Other Party provided a written contract or purchase order?

☐ No

☐ Yes (Please attach)

Prime Sponsor, if flow through:

### 5. Project Information

Type of Request:      ☐ New      ☐ Renewal\*      ☐ Continuation\*      ☐ Supplement\*      ☐ Revision/Resubmission

\*Indicate Current Award Number:

In response to RFP, RFA, RFQ, BAA, FOA, etc.?

☐ No

☐ Yes (Attach copy or provide website)

Limited Submission?

☐ No

☐ Yes, (Attach nomination letter)

Project Title:

Project Type (Please only choose one):

☐ Basic Research

☐ Applied Research

☐ Developmental Research

☐ Clinical Trial

☐ Other Research

☐ Training

☐ Equipment

☐ Public Service

☐ Other Services

☐ Other

Project Period (mm/dd/yy):

From:

To:

Amount of Request:

[Indirect \(F&A\) Cost Rate:](#)

%

Base:

☐ MTDC

☐ TDC

☐ TC

☐ Other (specify):

6. Project Location					
Place(s) of Performance (list all facilities):			Total percent time: (%)		
University Owned Facility(s)/ name of building:		Garamendi facility? <input type="checkbox"/> Yes <input type="checkbox"/> No			
**University Leased Facility(s)/ name of building:		(%)			
Other than University Owned or Leased:		(%)			
** Do you anticipate having to lease new space to conduct this project? <input type="checkbox"/> Yes <input type="checkbox"/> No					
7. Compliance					
<b>Safety:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have an injury prevention program? Will the project: <input type="checkbox"/> Yes <input type="checkbox"/> No Use Carcinogens? If Yes, please indicate CUA#: Approval Date: <input type="checkbox"/> Yes <input type="checkbox"/> No Use Ionizing Radiation? If Yes, please indicate RUA#: Approval Date: <input type="checkbox"/> Yes <input type="checkbox"/> No Use Pathogenic Agents? If Yes, please indicate BUA#: Approval Date: <input type="checkbox"/> Yes <input type="checkbox"/> No Involve Recombinant DNA? If Yes, please indicate BUA#: Approval Date: <input type="checkbox"/> Yes <input type="checkbox"/> No Use Human Anatomical Specimens? If Yes, please indicate Approval Date: <input type="checkbox"/> Yes <input type="checkbox"/> No Involve Federally Regulated Drugs or Controlled Substances? <input type="checkbox"/> Yes <input type="checkbox"/> No Produce medical waste? <input type="checkbox"/> Yes <input type="checkbox"/> No Involve scuba diving? If yes, date of certification by the UC Davis Diving Officer:. <input type="checkbox"/> Yes <input type="checkbox"/> No Involve operation of a boat? If yes, date of clearance by the UC Davis Boating Committee:					
<b>Are Human Subjects involved in this project?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide: Protocol No.: Approval Date: PI listed on approved Protocol:		<b>Are Vertebrate Animals involved?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide: Protocol No.: Approval Date: PI listed on approved Protocol:			
<b>Are Human Stem Cells involved in this project?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <a href="#">Cell Research Oversight</a>		If Yes, please indicate Protocol No.: Approval Date:			
<b>Institutional Required Information:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No In addition to the resources available in the <i>administering</i> department/division, <b><u>generally excluding recharge services</u></b> , will you be using personnel, space, equipment or other resources not under the direct control of the department chair or division director? If Yes, obtain signature of the chair/director responsible for those resources. <input type="checkbox"/> Yes <input type="checkbox"/> No Is the PI a UC Davis Cancer Center Member? <input type="checkbox"/> Yes <input type="checkbox"/> No Does this project involve cancer-related research?					
<b>Does any of the following apply to this project?</b> If none apply, click here <input type="checkbox"/> and proceed to the next question					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Yes <input type="checkbox"/> No Research generated from <a href="#">RISE/IFHA</a>  <input type="checkbox"/> Yes <input type="checkbox"/> No Any <a href="#">Centralized Core Facility</a>  <input type="checkbox"/> Yes <input type="checkbox"/> No International Collaboration  <input type="checkbox"/> Yes <input type="checkbox"/> No An <a href="#">SBIR or STTR</a> award         </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Yes <input type="checkbox"/> No Use of Interdisciplinary Research Support services  <input type="checkbox"/> Yes <input type="checkbox"/> No Multidisciplinary Research  <input type="checkbox"/> Yes <input type="checkbox"/> No Sustainability Research         </td> </tr> </table>				<input type="checkbox"/> Yes <input type="checkbox"/> No Research generated from <a href="#">RISE/IFHA</a> <input type="checkbox"/> Yes <input type="checkbox"/> No Any <a href="#">Centralized Core Facility</a> <input type="checkbox"/> Yes <input type="checkbox"/> No International Collaboration <input type="checkbox"/> Yes <input type="checkbox"/> No An <a href="#">SBIR or STTR</a> award	<input type="checkbox"/> Yes <input type="checkbox"/> No Use of Interdisciplinary Research Support services <input type="checkbox"/> Yes <input type="checkbox"/> No Multidisciplinary Research <input type="checkbox"/> Yes <input type="checkbox"/> No Sustainability Research
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<b>Does the Project involve any Organized Research Unit (ORU)?</b> If none apply, click here <input type="checkbox"/> and proceed to the next question					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Yes <input type="checkbox"/> No Air Quality Research Center  <input type="checkbox"/> Yes <input type="checkbox"/> No Comprehensive Cancer Center  <input type="checkbox"/> Yes <input type="checkbox"/> No Crocker Nuclear Laboratory  <input type="checkbox"/> Yes <input type="checkbox"/> No Institute of Transportation Studies  <input type="checkbox"/> Yes <input type="checkbox"/> No Program in International &amp; Community Nutrition  <input type="checkbox"/> Yes <input type="checkbox"/> No Does this project utilize any Primate Center (CNPRC) related resources, including recharge services? If Yes, obtain CNPRC signature. See <a href="#">UCD Directive 06-108</a> regarding application of indirect (F&amp;A) cost rate.         </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Yes <input type="checkbox"/> No Bodega Marine Laboratory  <input type="checkbox"/> Yes <input type="checkbox"/> No Center for Healthcare Policy and Research  <input type="checkbox"/> Yes <input type="checkbox"/> No Institute of Governmental Affairs  <input type="checkbox"/> Yes <input type="checkbox"/> No John Muir Institute of the Environment         </td> </tr> </table>				<input type="checkbox"/> Yes <input type="checkbox"/> No Air Quality Research Center <input type="checkbox"/> Yes <input type="checkbox"/> No Comprehensive Cancer Center <input type="checkbox"/> Yes <input type="checkbox"/> No Crocker Nuclear Laboratory <input type="checkbox"/> Yes <input type="checkbox"/> No Institute of Transportation Studies <input type="checkbox"/> Yes <input type="checkbox"/> No Program in International & Community Nutrition <input type="checkbox"/> Yes <input type="checkbox"/> No Does this project utilize any Primate Center (CNPRC) related resources, including recharge services? If Yes, obtain CNPRC signature. See <a href="#">UCD Directive 06-108</a> regarding application of indirect (F&A) cost rate.	<input type="checkbox"/> Yes <input type="checkbox"/> No Bodega Marine Laboratory <input type="checkbox"/> Yes <input type="checkbox"/> No Center for Healthcare Policy and Research <input type="checkbox"/> Yes <input type="checkbox"/> No Institute of Governmental Affairs <input type="checkbox"/> Yes <input type="checkbox"/> No John Muir Institute of the Environment
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<b>Disclosure of Financial Interest:</b> Check all that apply; if applicable, attach appropriate form (700-U and/or 800) <b>or</b> complete the online certification (form PHS800) available on the <a href="#">Forms</a> page of the Office of Research website.					
<input type="checkbox"/> Non-Government Sponsor (700-U) <input type="checkbox"/> NSF / NSF flow through, as well as <a href="#">These Sponsors</a> - <a href="#">Form</a> 800 <input type="checkbox"/> Exempt <input type="checkbox"/> PHS / PHS flow through, as well as <a href="#">These Sponsors</a> - <a href="#">Form</a> PHS800 – on line certification. Please list below all “investigator” of this project:					
<b>Export Control</b> – with respect to this project do you:			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		
• anticipate any shipment/transmission (e.g. via email) of research materials, equipment, or data outside the U.S.? • anticipate any travel outside the U.S. with any research materials, equipment (including laptops), or data by anyone on this project? • plan to conduct proprietary research with a potential military application <b>and</b> will your research team include non-U.S. nationals? Note: If the response is “Yes” to any question, the Research Compliance & Integrity unit will contact you for further information.					

Sponsor Name:  
Project Title:

**Subcontracts/Collaborative Subagreements:** For guidance on required documentation visit [Partnering with Other Institutions](#).

Will subcontract(s)/subagreement(s) be issued under this project? ☐ Yes ☐ No If "Yes" please complete both A & B below:

A) What was the basis for the selection of each subawardee/subcontractor (please add additional pages if more than one subawardee):

☐ Competitive Solicitation, or ☐ Sole Source, based on unique qualifications, facilities, equipment, know how, or integral part of a collaborative research team

B) Will any of these subcontract relationships result in an agreement between the University and (1) a current University employee or (2) a current employee's near relative (i.e., spouse or registered domestic partner, or dependent children) or (3) an entity in which you or your near relative [as defined in (2)] owns or controls or possesses a financial interest? ☐ Yes ☐ No If "Yes" complete both 1 & 2, below:

(1) Please complete the conflict of interest form at <http://purchasing.ucdavis.edu/forms/conflict.pdf> and submit approved form to Sponsored Programs (applicable policy: [UCD PPM 350-90](#)).

(2) Will any of these subcontract relationships result in an agreement between the University and a former University employee?  
☐ No ☐ Yes If yes, please enter the date of separation from UC Department, and which UC campus (UCD PPM 350-90), from which .

### 8. High Performance Computing Cluster

☐ Yes ☐ No Does your proposal require acquisition of an HPC cluster or similar servers?  
If yes, Please describe what commitments have been made (and by whom) to ensure appropriate space: ?

### 9. Cost Sharing

☐ Yes ☐ No Is Institution committing non-personnel costs toward this project?  
For guidance see <http://accounting.ucdavis.edu/costshare/whatis.cfm>

**10. Effort Commitment** – Please include all University of California, Davis investigators (principal, co-principal, collaborator, project director, etc.) For any investigator listed from the departments other than the one administering this project/study, please obtain and attach a letter of commitment signed by investigator and their department chair or dean (or both, if applicable). Attach separate sheet if necessary to list additional collaborators.

Name	Department (if different from administering department noted in Section 2)	Effort Directly Charged to Project (%)	Effort Cost Shared on Project (%)	Total Effort Committed to Project (%)
	, PI/PD	%	%	%
		%	%	%
		%	%	%
		%	%	%
		%	%	%

## Signatures

By signing below, I, the Principal Investigator/Project Director named in Section 2 above, certify to all of the items listed at the end of the [Instructions](#) for completing this form which include items listed on page 4 of this document

\_\_\_\_\_  
Principal Investigator/Project Director (required)

\_\_\_\_\_  
Date

Please print Chair's Name below

I, \_\_\_\_\_, the **Department Chair/Division Director**, certify that the project falls within the scope of the unit and that approval is given to commit departmental personnel and resources to the project.

\_\_\_\_\_  
Administering Department Chair/  
Division Director (**required**)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean (if applicable)\*

\_\_\_\_\_  
Date

\* Required by and for the:

Schools of Medicine, and Veterinary Medicine

\_\_\_\_\_  
Other (if required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Other (if required)

\_\_\_\_\_  
Date

=====

**Only original signatures are acceptable.** Signature stamps, electronic, or digital signatures and "per" signatures should **not** be used.

By signing the Data Sheet for Contract and Grant Proposals the Principal Investigator certifies to all of the following:

**Note:** Items 1, 2, and 3 below are in compliance with NIH NOT-OD-06-054, available at:  
<http://grants1.nih.gov/grants/guide/notice-files/NOT-OD-06-054.html>

1. **The information submitted within the proposal/application is true, complete and accurate to the best of my knowledge;**
2. Any false, fictitious, or fraudulent statements or claims within the proposal/application may subject him/her **personally** to criminal, civil, or administrative penalties;
3. He/she agrees to accept responsibility for the scientific conduct of the project and to provide the required progress reports to the sponsor if a grant is awarded as a result of the proposal/application;
4. **If the sponsor is [listed here](#), (i.e., following PHS COI regulations), the Principal Investigator/ Project Director, and all Investigators (with responsibility for the design, conduct, or reporting of research) on this project, each have completed (1) the [on-line educational training requirement](#), as well as (2) the [on-line financial interest disclosure](#);**
5. He/she will comply with sponsor and university policies and regulations;
6. He/she has read, and he/she is or will be in compliance with and abide by all the items included in the [Data Sheet Instructions](#);
7. The reasonableness of the kinds and levels of resources proposed and overall funding for the budget included for any subawardee(s)/ subcontractor(s) listed in the proposal;
8. That he/she has examined the proposal for completeness and accuracy (including the truthfulness of the scientific claims made, biographical data, and budget estimates), and explicit acknowledgment has been given to those who substantially contributed to the preparation of this proposal;
9. That he/she understands that willful provision of false or misleading information can subject the investigator and the University to severe monetary penalties;
10. That if the proposal is submitted to a Federal agency either directly or indirectly (i.e., through another organization), he/she and all Key Personnel are in compliance with applicable Federal financial disclosure regulations;
11. That if the proposal is submitted to a non-government organization that is not on the financial disclosure exemption list (see Section 7, above), he/she has completed and attached the state financial disclosure form (Form 700-U);
12. That he/she has read and will abide by the University policy on "Integrity in Research," dated June 19, 1990 (available at <http://www.ucop.edu/raohome/cgmemos/90-01S1.html>);
13. That if the proposal is submitted to a Federal agency either directly or indirectly through another organization, neither he/she, nor any person who will receive compensation under the anticipated award, is currently debarred, suspended, nor proposed for debarment from receiving Federal support for research. Further, he/she will notify Sponsored Programs if any person who will receive or is receiving compensation under the subject award is debarred or suspended from receiving Federal funds prior to the project's expiration date;
14. That if the proposal is submitted to a Federal agency either directly or indirectly through another organization, and if he/she or anyone funded by the project have engaged in any lobbying efforts for this project, he/she has done so on their own time and at their own expense and have not used any federal funds for this purpose. Further, if lobbying activities related to this project have been paid from a non-federal source, he/she will complete and submit Standard Form LLL, Disclosure of Lobbying Activities;
15. That if this project involves human subjects, he/she has read and will abide by and will ensure that those working on this project abide by applicable University and federal policy on the protection of human subjects;
16. That if this project will involve laboratory animals, he/she has read and will abide by and will ensure that those working on this project abide by applicable University policy on the care of laboratory animals;
17. That all direct charges to the contract or grant directly relate to the activity supported and are reasonable and allowable; that expenditures are consistent with all special terms, conditions, or limitations that apply to expenditures under the particular contract or grant; and that expenditures do not exceed the total funds authorized for a given period under the contract or grant. (In many cases the contract or grant may also specify expenditure limits by budget category or line item);
18. That he/she will be accountable for deficits or disallowances that occur under a contract or grant in accordance with campus procedures;
19. That he/she will keep adequate records related to the activities on this project and is aware that all such records, including laboratory notebooks, are the property of the University;
20. That if this proposal contains any information that needs to be kept confidential by federal or other reviewers and administrators, he/she has marked such information appropriately;
21. That if this project will involve patient records, he/she will keep such records confidential;
22. That if this project involves nonexempt use of recombinant DNA molecules, he/she will ensure that the research will be approved by the relevant campus biosafety committee;
23. That if the proposed research involves the taking, importation, or use of protected marine mammals, or any endangered or threatened species, he/she will comply with the applicable federal and/or state regulations and obtain the necessary permits and authorizations;
24. That he/she will comply with all applicable University policies for the conduct of research involving biohazards, carcinogens, hazardous or toxic wastes, or controlled substances;
25. That he/she will comply with all applicable University policies regarding nondiscrimination;
26. That if this is a proposal that will result in a contract under which he/she will provide technical advice to the federal government, then he/she does not believe that performance of this service will give him/her an unfair advantage in competing for other government contracts, nor does he/she believe that he/she will be unable to render impartial advice or assistance;
27. That if this is a proposal that will result in a federal contract in excess of \$100,000, he/she has not employed or retained any person or company to solicit or obtain this contract;
28. That if this is a proposal that will result in a federal contract in excess of \$100,000, he/she has not offered any gift, discussed any job offer, or solicited any proprietary information or source selection information from any federal official who is involved in awarding this contract;
29. That he/she is eligible to be a Principal Investigator on a UC Davis project;
30. That the salaries included in the proposal budget are in compliance with UC salary scales (see Academic Personnel Manual and Staff Salary Scales Manual);
31. That the employee benefits budgeted in the proposal are either based on actual benefits rates or campus composite rates, exclusive of leave accrual;
32. That either applicable federally-negotiated indirect (F&A) cost rates have been used or an approved waiver is currently on file or has been requested for the F&A rate used in calculating the budget;
33. That graduate student fee remission and/or non-resident tuition, if allowable, has been included for eligible Graduate Students assigned, or expected to be assigned, to the project in accordance with campus policy;
34. That the cost of living adjustments do not exceed recommended levels, or if they do they have been adequately justified;
35. That the sponsor or an agent acting on behalf of the sponsor will have access to the facilities where the project is conducted, and be permitted to review technical and financial project records;
36. That he/she has the technical ability to conduct the project, and that research space, including any special utilities, transportation requirements, or facilities, is available to conduct the project and necessary approvals have been authorized; and
37. That each Co-Principal Investigator and Key Person listed on this project is aware that his/her names have been included in the proposal and that each is willing to provide support to the project.