## Attachment 3: FY25 BAA Application Checklist

**Proposal Title**:

**Primary Offeror**:

**Technical contact**: name, address, phone/fax, electronic mail address

**Administrative and/or Business contact**: name, address, phone/fax, electronic mail address

As described in Part I of this announcement:

**Charge Area**:  Charge I ;  Charge II; or  Charge III

**Regulatory Science Topic Area of Interest**:  A ;  B;  C;  D ;  E;  F;  G ;  H;  I;  J ; or  K;

**FDA Regulated Areas**:

**Demographic and/or Populations**:

|  |  |
| --- | --- |
| CHECKLIST | Comments |
| Concept Paper | Required |
| Volume I – Technical Proposal | Required |
| Volume I – Technical Proposal Appendix | Required |
| Volume II – Cost Proposal | Required |
| Volume II – Cost Proposal Appendix |  |
| Statement of Work (SOW) | Required |
| Supplementary Material 1 | Provide description |
| Supplementary Material 2 | Provide description |
| other | Provide description |