



TOUGALOO COLLEGE

AUTHORIZATION TO SUBMIT FOR GRANT OR CONTRACT

(The original proposal must be attached to this form.)

APPLICATION STATUS <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Renewal <input type="checkbox"/> Revision	DUE DATE _____ FUNDING AGENCY _____ AMOUNT REQUESTED _____ TOTAL AMOUNT OF PROJECT _____ MATCHING FUNDS REQUIRED _____ Yes _____ No (Indicate Percent or Amount) _____ PROJECT DATES: START _____ FINISH _____
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1. PI/PROJECT DIRECTOR: _____

TELEPHONE EXTENSION: _____

2. PROJECT TITLE: _____

3. QUALITY ASSURANCE CERTIFICATION

I have read the attached proposal and affirm that the content, design and cost are correct. This application is appropriate to Tougaloo College's mission and the current five-year plan. The proposal is in order and complete; it is recommended for submission.

Project Director Date

Sponsored Programs Director Date