



## UWW ORSP DEADLINE: OPEN

# UNIVERSITY OF WISCONSIN SYSTEM AND WISYS TECHNOLOGY FOUNDATION REASSIGNMENT TIME GRANT

## INTRAMURAL GRANT APPLICATION PACKAGE

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**University of Wisconsin-Whitewater Office of Research and Sponsored Programs Intramural Transmittal Form.** ONE original, complete ORSP Transmittal Form including all relevant funding competition information, proposal information, required clearances, and required signatures must accompany each proposal submitted to ORSP.

X

**Proposal Development and Submission Instructions.** Each University of Wisconsin grant program has varying proposal development and submission requirements. Principal Investigators must review this application package carefully and adhere to specific program requirements to be competitive.

X

**Grant Program Forms.** Each University of Wisconsin grant program requires the submission of different forms. All relevant forms are included in this application package. Electronic versions of all forms can be accessed on the ORSP Funding Page (<http://www.uwworsp.org/media/funding.htm>).

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**Additional Proposal Development and Submission Resources.** University of Wisconsin grant application packages may include additional resource information including evaluation/review criteria, description of proposal review processes and deadlines, and other pertinent appendices.

*The Office of Research and Sponsored Programs can provide additional information, proposal development assistance, and copies of funded proposals. ALL proposals must be submitted to ORSP. Grants submitted to directly to System or Extension may not be reviewed.*

DENISE EHLEN, Director, 262-472-5212, ehlend@uww.edu  
ORSP, 2243 Andersen Library, [www.uwworsp.org](http://www.uwworsp.org)





UNIVERSITY OF WISCONSIN  
WHITWATER

RSP APPROVAL & CERTIFICATION  
TRANSMITTAL



DO NOT COMPLETE SHADED SECTIONS WITH DOUBLED BORDER – FOR UWW RSP USE ONLY

<b>FUNDING COMPETITION INFORMATION</b> Deadline:		<b>RSP USE ONLY</b> ID:	
1. Sponsor & Program:		Date Submitted:	
2. Address:		Number of Copies to Sponsor (original +)	
3. Telephone:	Fax:	Binding of Original: <input type="checkbox"/> Clip <input type="checkbox"/> Staple <input type="checkbox"/> Other <input type="checkbox"/> N/A	
4. Web:		GT Proposal Entry: GT Award:	
4. Notes:			
<b>PROPOSAL INFORMATION</b>			
5. Principal Investigator:		5a. Department/Division/Institution:	
5b. Address:		Phone:	Fax: Email:
6. Co-Investigator:		6a. Department/Division/Institution:	
6b. Address:		Phone:	Fax: Email:
7. Co-Investigator:		7a. Department/Division/Institution:	
7b. Address:		Phone:	Fax: Email:
8. Co-Investigator:		8a. Department/Division/Institution:	
8b. Address:		Phone:	Fax: Email:
9. Project Title:			
10. Funding Type <input type="checkbox"/> New <input type="checkbox"/> Renewal/Continuation		<b>AWARD INFORMATION – RSP USE ONLY</b> <input type="checkbox"/> GRANT <input type="checkbox"/> CONTRACT	
11. Total Request \$		New Account <input type="checkbox"/> Non-Federal <input type="checkbox"/> Federal (CFDA# )	
12. Match Information \$		Org Information <input type="checkbox"/> New <input type="checkbox"/> Add To	
13. Begin Date End Date		Total Award Begin Date End Date	
<b>REQUIRED CLEARANCES – Does the project involve:</b> <i>Approved? (choose one)</i>			
14. toxic, infectious or carcinogenic/mutagenic material? Use recombinant DNA technology?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
15. use of human subjects, human tissue or vertebrate animals?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
16. action involving space, remodeling, or construction?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
17. hiring non-UWW personnel?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
18. requires release time by PI (and/or Co-Is) in support of project activities?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
19. creation of new degree programs or services?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
20. potential environmental impacts, which require review under the Wisconsin Environmental Policy Act?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Pending	
<b>REQUIRED SIGNATURES</b>		<b>PLEASE RETURN FORM TO RSP</b>	
<b>PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR</b>		SIGNATURE DATE	
I certify that the plan detailed in the proposal/contract complies with all campus, state, and federal regulations and policies and reflects University, College/Division, and Department/Unit goals. This project is achievable as described, including the limitations of time, resources, and personnel expertise. All required clearances have been satisfied. I have disclosed any possible conflicts of interest during the proposal development process. If awarded, I agree to conduct the proposed project in compliance with (1) the conditions of the grant and (2) with all policies of UWW, UWS, and the State of Wisconsin.		TYPED NAME:	
I authorize the use of my name and grant information for university publication. <input type="checkbox"/> NO <input type="checkbox"/> YES (initial)			
<b>DEPARTMENT CHAIR/UNIT DIRECTOR</b>		SIGNATURE DATE	
I certify that I have reviewed the proposal/contract and found it to be complete, including required clearances, budget, and commitments involving space, faculty/staff time, and matching funds. In addition, I certify that all resources and other provisions of any award will be fulfilled. A match (check one) <input type="checkbox"/> has OR <input type="checkbox"/> has NOT been pledged. Cash match will be satisfied by a transfer of funds from org code _____-_____ in the amount of \$_____ or via in-kind contributions as described in the budget (narrative).		TYPED NAME:	
<b>COLLEGE DEAN/DIVISION DIRECTOR(S)</b>		SIGNATURE DATE	
I certify that I have reviewed the proposal/contract and found it to be complete, including required clearances, budget, and commitments involving space, faculty/staff time, and matching funds. In addition, I certify that all resources and other provisions of any award will be fulfilled. A match (check one) <input type="checkbox"/> has OR <input type="checkbox"/> has NOT been pledged. Cash match will be satisfied by a transfer of funds from org code _____-_____ in the amount of \$_____ or via in-kind contributions as described in the budget (narrative).		TYPED NAME:	
<i>Applicants submitting proposals including an international component must secure the signature of the Director of the Center for Global Education in this cell.</i>		TYPED NAME:	
<b>RESEARCH AND SPONSORED PROGRAMS CERTIFICATION</b>		SIGNATURE DATE	
By signing this transmittal, I certify that this proposal/contract is consistent with campus, state, and federal regulations; is within the campus' research/service mission; and is approved for submission to the funding agency.			
INITIAL HERE TO APPROVE GRANT/CONTRACT ACCEPTANCE:		DATE: TYPED NAME: DENISE EHLEN	

UNIVERSITY OF WISCONSIN SYSTEM  
AND WISYS TECHNOLOGY  
FOUNDATION REASSIGNMENT TIME  
GRANT PROGRAM

**SPECIAL NOTE**

Applicants must first submit the proposal to the Office of Research and Sponsored Programs (ORSP) for internal review, Provost signature, and match commitment. ORSP will provide/obtain the required institutional match.

Contact Denise Ehlen (ehlend, x5212) with additional questions.

**UW System & WiSys Technology Foundation  
Reassignment Time Grant Program  
FY 2010-11**

The UW System and WiSys Technology Foundation are offering limited funds to System faculty to exclusively support faculty time to write extramural grant applications for FY 10/11. All grant applications will be considered. Funding may be requested for any discipline, but preference will be given for science, technology, engineering and mathematics applications.

Although there is no deadline for the Reassignment Time Grant submissions, applicants are encouraged to apply without delay as funds are limited. Applications will be reviewed on a first come, first serve basis. Grants will be limited to a maximum of \$3,500 per applicant, broken down as follows: UW System will contribute \$2,500; WiSys will contribute \$500; each campus will be required to contribute \$500.

Reassignment Time Grants can be used to defray the cost of reassignment from teaching a course or for summer salary support, as long the grant recipient devotes the time for grant development. However, UW System and WiSys funding cannot be used for supplies.

Reassignment Time Grant applications must be:

- for an extramural funding opportunity of \$50,000 or more
- processed and approved by each campus grants office, and
- forwarded to WiSys with the signature of the Provost.

WiSys will screen each Reassignment Time Grant application received and provide a recommendation to the UW System. The final decision to fund remains with UW System. Applications will be screened for the following criteria:

- Merit of the scientific or subject matter of the research to be proposed in the extramural grant application,
- likelihood of extramural funding, and
- potential for intellectual property (patents)

Recipients of Reassignment Time Grants must agree to prepare and submit a full proposal to the extramural agency by the extramural grant deadline. A copy of the extramural application must be submitted to WiSys. WiSys will maintain confidentiality of the extramural grant applications and will contact the recipient regarding appropriate intellectual property protection.

In cases where an extramural grant is not awarded, WiSys will keep in contact with Reassignment Time Grant recipients to monitor future extramural grant submissions of the project to the same or other agencies. This will assist WiSys in gauging the success of the Reassignment Time Grant program.

Please submit an electronic version of your application online at [www.wisys.org/forresearchers/](http://www.wisys.org/forresearchers/) (click on the Re-assignment Time Grant tab to the left). If you prefer, you may also submit a hard copy to:

WiSys Technology Foundation, Inc.  
P. O. Box 7365, Madison, WI 53707-7365  
Email: [lmurray@wisys.org](mailto:lmurray@wisys.org); Ph: (608) 263-2819; Fax: (608) 263-1064

**UW System & WiSys Technology Foundation  
Assistance for  
Extramural Grant Applications**

Application Requirements for Re-Assignment Time Grant

1. Name and address of PI and Co-PIs:
  
2. Title or subject area for application that will be developed for extramural funding:
  
3. Name of extramural agency, name of grant program and total budget amount projected for the proposal:
  
4. Deadline to submit extramural funding application:
  
5. Fiscal Year in which \$3,500 will be used:
  
6. Date by which you expect to receive the extramural funding decision (s):
  
7. Brief description of the technology or concept for which application will be developed (~30 lines):
  
8. Reasons why the extramural grant request is likely to be funded. Include collaborators, past funding success, novelty/strength of the approach, preliminary evidence/data, etc:
  
9. Potential for intellectual property (patents):
  
10. Title and amount of past extramural grants to PI or Co-PI:

**UW System & WiSys Technology Foundation  
Assistance for  
Extramural Grant Applications**

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Certification by PI and/or Co-PI

I/We hereby certify that if the request for a Re-Assignment Time for Extramural Proposal Writing Grant is approved and funded by the UW System and WiSys, I/we will use the funds to obtain re-assignment time to write the specified extramural grant application and will submit a full copy to WiSys by the indicated deadline.

Signature..... Date.....

Certification by the Office of the Provost

It is hereby certified that if the UW System and WiSys agree to fund this application, UW (list campus) campus administration will provide a matching fund of \$1,000. The grant money will be used for the sole purpose of providing re-assignment time to the PI and/or Co-PI to write the extramural grant application.

Signature..... Date.....