



PI Name: Department: e-mail:  
 Sponsor: Proposal Title:  
 Is cost-sharing required by the sponsor as a condition of the award? YES NO

Justification:

Principal Investigator Certification: *I certify that the cost-sharing requested represents costs directly related to the work statement of the named proposal/project and represents allowable cost-sharing.*

Principal Investigator Signature Date Evisions # Grant/Fund

**Personnel - please provide all cost-shared individuals, percentage effort cost-shared, and funding sources**

Name	CS Effort %	Year 1	Year 2	Year 3	Year 4	Year 5	Index Funding Source
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**Materials & Supplies**  
*(explain in comments section)*

**Equipment**  
*(explain in comments section)*

**Other**  
*(explain in comments section)*

**Unrecovered Indirect Costs**

**Waived Indirect Costs**  
*(must be approved by SPA Assoc VP)*

Annual Cost-Share Totals

Comments: Cost-Sharing Period  
to

Signatures

Chair/Director Dean (if required)