

PROVISIONAL FUND REQUEST (PFR)

1. Type of Request: ☐ Establish ☐ Amend 2. Proposal #: _____

3. Proposed Start Date: _____ 4. Are there Pre-Award Costs? ☐ Yes ☐ No

5. If Yes, Pre-Award Effective Date: _____ Funding Source Index: _____

6. Description of/Reason for Request: _____ Used if sponsor funding not realized

	Index	Fund	Org.	Program
7. Prior FOAPAL String:				

	Index	Fund	Org.	Program
8. Current FOAPAL String:				

9. Principal Investigator: _____ Department: _____

10. Agency/Sponsor: _____

11. Title: _____

12. 4 Month Limitation on Expenditures by Category as Follows:

	New or Original Request		Modifications to Original or Previous Request		Total (The Total Should Represent the Cumulative Amount)
Salaries and Wages		+/-		=	
Fringes		+/-		=	
Equipment (\$5,000.00 or greater)		+/-		=	
Supplies		+/-		=	
Travel		+/-		=	
Tuition		+/-		=	
Other		+/-		=	
		+/-		=	
TOTAL (Departmental funds committed to account)					

I support the request to initiate this grant/contract action. I recognize that my unit will be charged for any expenditures incurred if this grant/contract is not realized. **SAVE PDF TO DESKTOP TO ACTIVATE ELECTRONIC SIGNATURE.**

13. Principal Investigator Signature: _____ Date: _____

14. Department Chair
Signature: _____ Date: _____

Sponsored Program Administration Information:

Status of grant/contract: _____

SPA Approval Signature: _____ Date: _____

Provisional Fund Request (PFR)

1. Type of Request:

Establish: Create a NEW Index/FOAPAL. You must reference the correct approved eProp proposal with this request.

Amend: Adjust established PFR FOAPAL

2. Proposal #:

Unique log number assigned by SPA to record receipt of proposal

3. Proposed Start Date:

Expected date that agency will award the project

4. Are there Pre-Award Costs?:

Yes: If needed and agency allows

No: If you don't need and/or agency does not allow

5. Pre-Award Effective Date:

Earliest date that agency will allow expenditures to be incurred and work to begin. Complete only if Pre-Award costs are requested.

6. Description of/Reason for Request:

Provide additional information to SPA regarding action request

7. Prior FOAPAL String:

Fill in Banner codes **only** when requesting a tentative establishment of an Index/FOAPAL on a project. These codes were assigned to the project for the previous funding period.

8. Current Index/FOAPAL String:

Banner codes established by SPA, which are unique to this funded project to record all financial activity (amend only)

9. Principal Investigator:

Provide name of primary investigator for project

10. Agency/Sponsor:

Entity responsible for funding the project

11. Title:

Project title as submitted to the sponsoring agency, or title as it has been amended by sponsoring agency

12. 4 Month Limitation on Expenditures by Category:

New or Original Request: 4 months of proposed budget (may increase if Pre-Award costs requested)

Modifications to original or previous request (can only be for an additional 4 months): The dollar changes now requested to amend a provisional fund

Cumulative Amount: This column should reflect line item totals after modifications

13. Principal Investigator Signature:

Signed approval by Principal Investigator or his/her designee for request action

14. Authorized Dept/College Representative Signature:

Signed approval by authorized Department/College representative