

PI Checklist

Integrated Research Office



The Integrated Research Office (IRO) requires the PI to follow these procedures for any submission request:

1. PI completes this PI Checklist and submits from their email to their assigned grants analyst.*
2. PI contacts their grants analyst to meet and discuss submission details and review the PI Checklist.

Submission of this form represents the PI's commitment to adhere to all due dates and to maintain timely communication with their grants analyst throughout the submission process.

General Application Information

PI Name

Project Short Title

Funder

Application Type

URL of RFA/FOA

PI Out-of-Office Dates (3 weeks prior to submission):

Application Specifics

Funding Type

Does this funding cover the PI's full effort for the project and the effort of all other project personnel?

No Yes If No, select cost share type:

Indirect Cost Rate

If you selected other, please enter rate:

Will you be subcontracting with other universities or entities?

No Yes If yes, institution(s):

Application Submission Deadlines

Visit the IRO Grants and Contracts website to determine the required submission materials for each deadline.

<http://www.ohsu.edu/xd/research/centers-institutes/institute-on-development-and-disability/grants-and-contract-office/index.cfm>

Funder Due Date

Funder's due date to receive the completed application

-3 Business Days

Deadline for **final application materials** to be submitted to RGC for review

-10 Business Days

Deadline for PI to submit all **required submission materials by noon** to their grants analyst for RGC review

-15 Business Days

Deadline for PI to **submit** PPQ, final budget, abstract, and cost share agreement or IDC waiver (if applicable) by noon to their grants analyst

In Person Meeting

PI to **meet with their grants analyst** to review submission requirements and timeline and review changes in requests for indirect costs or cost share

Community Benefit Category

Will the community benefit or will a community service result as a part of this project? If yes, select category.

IDD PIs Only

Have community advocates, patients, and/or families been involved in designing this project?

If yes, list names:

-----* **The PI must personally submit this completed form via email** *-----