



**Office of Sponsored Research Administration**  
**Proposal Development Intent Form**

**Principal Investigator Information**

Full name: \_\_\_\_\_

Academic Title: \_\_\_\_\_

Department/College: \_\_\_\_\_

SSU Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

**Sponsor Information**

Agency Name: \_\_\_\_\_ Solicitation #: \_\_\_\_\_

Grant Program Name: \_\_\_\_\_

Program URL: \_\_\_\_\_

Application Deadline: \_\_\_\_\_ Funding limit: \_\_\_\_\_

**Project Information**

Proposal Title: \_\_\_\_\_

Target Budget: \_\_\_\_\_ Total Project period: \_\_\_\_\_ to \_\_\_\_\_

**Institutional Approval**

Signature of the PI: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Dean: \_\_\_\_\_ Date: \_\_\_\_\_