



INTERNAL PROPOSAL REVIEW FORM (IPR)

I. PRINCIPAL INVESTIGATOR INFORMATION			
PI: Richard Jones		EMP ID: 615340	Academic Dept.: Physics
PI Title: Associate Professor		Dept. Contact: Dawn Rawlinson	Phone: 486-4916
Phone: 486-3512	Fax: 486-6414	Unit: 3046	Email: richard.t.jones@uconn.edu
Co-I #1:	EMP ID:	Academic Dept.:	
Co-I #2:	EMP ID:	Academic Dept.:	
Co-I #3:	EMP ID:	Academic Dept.:	
II. SPONSOR INFORMATION			
Sponsor Agency: Thomas Jefferson National Accelerator Facility, 12000 Jefferson Ave, Newport News, VA			
If this is an NIH application, does it involve Multiple PIs? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, contact PI name:	
Notice of Opportunity (Identify Program # or provide URL): this is a sole-source contract, not competitive, no public notice posted			
If pass-through funding, list originating sponsor: Jefferson Science Associates operates TJNAF on behalf of U.S. DOE			
Sponsor Deadline: <input type="checkbox"/> Electronic: 09/09/9999 <input type="checkbox"/> Paper: _____		<i>PIs are responsible for submitting all applications to the sponsor, except when OSP submission is required.</i>	
III. PROJECT INFORMATION			
Project Title: Fabrication of the Hall D Tagger Microscope and Active Collimator			
Project Start Date: 10/01/2012		Project End Date: 09/30/2014	Total Request: \$85,000
Department/Center that will manage account if NOT the Academic Dept.: <i>(Dept. Head/Center Director signature required on Certification page)</i>			
Other Affiliated Center(s):			
Proposal Type: New		Program Type: Equipment	
* For a Continuation, Renewal or Supplement, please provide current FRS account #		Program Income <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
For this project, the PI or key personnel have significant financial interests		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cost Sharing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If yes, complete cost share form and secure appropriate signatures)</i>
This project includes subcontractor(s)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Sponsor Limited F&A Rate <i>(attach sponsor documentation)</i>
This project has an international component		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
This project may be subject to Export Control Laws		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
This project contains confidential information		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
IV. SPECIAL REVIEWS/APPROVALS NEEDED			
Human Subjects <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Approval #	Recombinant DNA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Animal Subjects <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Chemical Hazards <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Human Embryonic Stem Cells <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Laser (Class 3b or 4) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Biohazardous Materials <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Controlled Substances <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Select Agents <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Radioactive Materials and/or Radiation Devices <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

OSP INFORMATION

OSP Proposal #:	Reviewer Initials:	Approval Date:	Full Copy Received <input type="checkbox"/>
Rev: 02/09/10	Institutional Authorization:	Date:	



INTERNAL PROPOSAL REVIEW FORM CERTIFICATIONS

PI: Richard Jones
Project Title: Fabrication of the Hall D Tagger Microscope and Active Collimator
Sponsor: Thomas Jefferson National Accelerator Facility, 12000 Jefferson Ave, Newport News, VA

The Principal Investigator (PI) hereby certifies:

- (1) The information submitted within this application is true, accurate, and complete to the best of my knowledge.
- (2) I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.
- (3) I agree to accept responsibility for the scientific conduct of the project and to provide the required reports if a grant is awarded as a result of the application.
- (4) If an award is made, I am responsible for compliance with award terms and conditions and university policies and procedures; particularly for the technical conduct of the work, submission of technical reports, regulatory compliance, and financial management.
- (5) I am aware of federal requirements on lobbying. I am in compliance and have disclosed any lobbying activity.
- (6) I am aware of the requirement of the NIH Access Policy to submit journal articles that arise from NIH funds to the digital archive PubMed Central.
- (7) I am NOT debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from current transactions by a federal department or agency.
- (8) I have read and understand the University's Conflict of Interest Policy.
- (9) If this is an NIH application and involves multiple PIs, I agree to the leadership plan as described in the application.

	<i>Name (print/type)</i>	<i>Signature</i>	<i>Date</i>	<i>Distrib. of Credit % *</i>
Principal Investigator	Richard Jones	<i>Richard Jones</i>	7/26/12	0.00%
Co-Investigator #1				0.00%
Co-Investigator #2				0.00%
Co-Investigator #3				0.00%
<i>I/We certify that the proposed work is consistent with department, school or center objectives and endorse the proposal to the agency named. I/We are aware of commitments and obligations described.</i>				
Dept. Head/Center Director	<i>Douglas Hamitt</i>	<i>Douglas Hamitt</i>	7/26/12	
Dept. Head/Center Director				
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OSP Proposal #: _____

** Depts. may utilize to allocate credit for new grants & contracts.
* Information is neither required nor tracked by OSP.*



Cost Share Approval Form

PI: Richard Jones
Project Title: Fabrication of the Hall D Tagger Microscope and Active Collimator
Sponsor: Thomas Jefferson National Accelerator Facility, 12000 Jefferson Ave, Newport News, VA

Does the sponsor require cost sharing: Yes No

List all project costs not funded by the sponsor but described in the budget, budget justification and/or project narrative. Secure the necessary approval signatures and include a copy of this form in the proposal.

	Name (print/type)	% AY effort	Salary	Fringe	Total
Principal Investigator	Richard Jones	0.00%			\$0
Co-Investigator #1		0.00%			\$0
Co-Investigator #2		0.00%			\$0
Co-Investigator #3		0.00%			\$0
			\$0	\$0	\$0

	Personnel	Equipment	Other	Total	Approval Signature <i>(or attach commitment letter)</i>
Department Head/Center Director				\$0	
Department Head/Center Director				\$0	
Department Head/Center Director				\$0	
Department Head/Center Director				\$0	
Dean				\$0	
Dean				\$0	
Dean				\$0	
VP for Research				\$0	
Other				\$0	
Other				\$0	

OSP Proposal #: _____