**PROPOSAL TO**

Name of institution receiving the proposal

**Title:** “Proposal Title”

**Project Director:** Name

Title

Department

Email

Phone

**Amount Requested:** $xxx,xxx

**Project Dates:** xx/xx/xxxx – xx/xx/xxxx

**Legal Applicant:** Trustees of Indiana University

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**EIN:** 35-600-1673

**Fiscal Officer:** James P. Becker

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**Authorizing Official:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Steven Allen Martin

Associate Vice President for Research Administration

Indiana University