

SEIRI Request Form: Proposal Support

Instructions: Please complete and submit this form to the IUPUI STEM Education Innovation & Research Institute by email to Sheila Summers at shesumme@iupui.edu or in-person at UL1123. The form provides information to SEIRI about your proposal for tracking purposes. It also provides the investigator(s) with expectations for working with SEIRI on grant proposals.

Note: SEIRI offers three different mechanisms of support on grant proposals:

- **Research:** If you would like SEIRI to partner as education researchers, contact SEIRI at least **two months** before the proposal needs to be submitted. Depending on the scope of work, SEIRI's budget for this type of effort will likely exceed 15% of the total budget.
- **Evaluation:** If you would like SEIRI to evaluate your project, please contact SEIRI at least **one month** before your proposal needs to be submitted. For program evaluations, SEIRI usually requests 5% - 15% of the total budget.
- **Consultation:** If you only need consultation on your proposal and post-award, contact SEIRI at least **three weeks** before the due date. If SEIRI will consult on your grant, you should plan to devote 3% - 5% of your budget to SEIRI personnel.

Additional note: Project deadlines have to be strictly enforced in order to meet University requirements. In the event that the Project Director/Principal Investigator is unable to meet the established deadlines then SEIRI services may be terminated.

1. Funding agency name and webpage link to the funding program announcement:

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2. Does the opportunity require approval through the IU Limited Submission process?

No	Yes	If Yes, date of approval	If Yes, identification number

3. Agency submission deadline? If yes, specify the date of the deadline.

No	Uncertain	Yes	If Yes, date of deadline

4. Anticipated project dates:

Start date	End date

5. Estimated award amount (total costs):

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6. Title of the proposed project:

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7. Project Director/Principal Investigator:

Name	School	Department
Phone	Email	Office Address

8. Project investigators and collaborators (with contact information):

Name	Institution	Email

9. Estimated Level of Assistance requested by SEIRI on the projects (mark with an x):

Educational Research	Evaluation	Consultation

10. PI Responsibilities:

- SEIRI reserves the right to review the final project description prior to uploading.
- SEIRI's research or evaluation plan will not be modified without consulting SEIRI first.
- Ensure that SEIRI's requested travel costs, publication costs, and research associate costs are accurately included in the budget.
- SEIRI will recover indirect costs at a rate proportional to SEIRI personnel's effort.
- When routing the budget through Quali Coeus, SEIRI personnel listed on the project will be listed as Key Personnel. This will designate Dr. Varma-Nelson as an internal approver.
- Following budget routing, the PI will share a copy of the "Quali Coeus Proposal Summary" document.
- Regardless of outcome, the PI will share the funding agency's reviews of the proposal with SEIRI personnel listed on the grant.
- Upon final approval from the awarding body, the PI will receive a Memorandum of Understanding from SEIRI that will require his or her approval.

Initial SEIRI Contact Name	Date
Assigned SEIRI Consultant Name	Email

Principal Investigator's Signature: _____ **Date:** _____

Department Chair's Signature: _____ **Date:** _____

Dr. Varma-Nelson's Signature: _____ **Date:** _____