

# The Water Research Foundation

## 2024 Unsolicited Research Program Full Proposal Cover Sheet

ID #

Project Title:

**Organization:** *(Legal name as shown on W9)*

Organization:

Legal Address *(No P.O. Boxes Please):*

**Personnel:** *(Separately upload CV or brief resume for PI, Co-PIs and other key research team members)*

**Principal Investigator:** *Individual responsible for the technical completion of the proposed work.*

Name:

Title:

Organization:

Complete Address:

Phone:  E-mail:

**Co-Principal Investigator:** *Individual responsible for the completion of major portions of the proposed work.*

Name:

Title:

Organization:

Complete Address:

Phone:  E-mail:

For additional Co-PIs, use Additional Co-PIs form.

**Authorized Representative:** *Individual at your organization authorized to sign legal contracts and commit organization's participation.*

Name:

Title:

Organization:

Complete Address:

Phone:  E-mail:

**Accounting Contact:** *Individual authorized to accept payments.*

Name:

Title:

Organization:

Complete Address:

Phone:  E-mail:

Is PO # required for payment? Yes      No

**Administrative Contact:** *Individual from Sponsored Programs office to contact concerning administrative matters (i.e., indirect cost rate computation, rebudgeting requests, etc.).*

Name:

Title:

Organization:

Complete Address:

Phone:  E-mail:

**Contracting (legal) Contact:** *Individual responsible for contract administration including contract negotiation and contract amendments (if applicable)*

Name:

Title:

Organization:

Complete Address:

Phone:  E-mail:

Project Period (months):

**WRF Funding**

**Cost Share/3<sup>rd</sup> Party**

**Total Budget**