

**REQUEST FOR PROJECT COST SHARE**

**NOTE:** Project cost sharing is appropriate only when required by the sponsor in the proposal solicitation. Participating units are expected to contribute to the cost share amount. The University prefers to meet cost share first with unrecoverable Indirect (Facilities and Administrative) Costs and salaries and fringe benefits of existing faculty/personnel.

**Sponsor:** \_\_\_\_\_ Solicitation/CFDA# \_\_\_\_\_ Unrecoverable F&A Used (\$) \_\_\_\_\_

**Project Title:** \_\_\_\_\_

**Investigators:**

<i>Role</i>	<i>Name</i>	<i>Department/Unit</i>
PI	_____	_____
A. Co-PI	_____	_____
B. Co-PI	_____	_____
C. Co-PI	_____	_____

**CS will be funded through (if known):** PI CC# \_\_\_\_\_ Dept. CC# \_\_\_\_\_ Dean CC# \_\_\_\_\_

Investigator(s)	Year 1		Year 2		Year 3		Year 4		Year 5		Total
	Amount	Category	Amount	Category	Amount	Category	Amount	Category	Amount	Category	
PI	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-PI	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-PI	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-PI	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Department(s)											
PI Dept.	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-I Dept.	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-I Dept.	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-I Dept.	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Dean(s)											
PI Dean	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-I Dean	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Co-I Dean	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
VPRED	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
TOTAL	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

**Assurance:** By signing this document, I agree to provide cost share in the amount(s) shown for the duration of the project. (Signatures will be obtained upon determination of final budget.)

Investigators	Department Heads/Chairs	Deans
PI	_____	_____
Co-I	_____	_____
Co-I	_____	_____
Co-I	_____	_____

VPRED Approval \_\_\_\_\_

If project crosses departmental lines, please provide detailed cost share commitments for all departments and deans.