



The Coeus Questionnaire – **Grants.gov Questions** – is programmed to display only the questions needed for the specific Grants.gov opportunity that you are applying for. This document details the questions & explanations and how the questions populate the Grants.gov forms.

**Note – Questionnaire ID and YNQ ID are not visible in the application.*

| Ques. ID | YNQ ID | Question | Explanation | Options | Agency | Form | Field |
|----------|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------------------|-----------------------------------|----------------|
| 134 | | Is this a Grants.gov system-to-system (s2s) submission? If Yes, you will be presented with questions related to the forms in your sponsor opportunity. | | Y / N | | | |
| 128 | 15 | Is this application being submitted to other agencies? | Check Yes if this proposal is being submitted to another federal agency or agencies. | Y / N | Any agency using R&R forms | SF424 (R&R) – Cover Page | Box 8 |
| 111 | | Select a U.S. Government Agency: | Please use the search function to select the other agencies the application is being submitted to. (Only one can be selected as this time). | Search | | | |
| 129 | EO | Is the proposal subject to review by state executive order 12372 process? | Check Yes if the program announcement indicates that the program is covered under Executive Order 12372. | Y / N | Any agency using R&R forms | SF424 (R&R) – Cover Page (Page 2) | Question 16 |
| 130 | | If Yes: Please provide the date the application was made available for review [submitted to the state]. Enter in MM/DD/YYYY format. | | Text | | | Question 16(a) |
| 131 | | If No: Is the program not selected for review or not covered by E.O. 12372? Select a response. | For NIH and other PHS agencies submissions using the SF424 (R&R), applicants should check “No, Program is not covered by E.O. 12372.” | Search | | | Question 16(b) |
| 122 | G8 | Is proprietary/privileged information included in the application? | Check Yes if the application includes patentable Ideas, trade secrets, privileged or confidential commercial or financial information. If Yes, Clearly mark each line or paragraph on the pages containing the proprietary/privileged information with a legend similar to: The | Y / N | Any agency using (R&R) forms | R&R Other Project Info | Question 3 |

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| | | | following contains proprietary/privileged information that (name of applicant) requests not be released to persons outside the Government, except for purposes of review and evaluation. (Proprietary or Privileged information should be included in applications only when such information is necessary to convey an understanding of the proposed project.) | | | | |
| 123 | G9 | Does this project have an actual or potential impact on the environment? | Unless the FOA (announcement) indicates that the National Environmental Policy Act (NEPA) applies, applicants should check No . If your project will have an actual or potential impact on the environment, check Yes . | Y / N | Any agency using R&R forms | R&R Other Project Info | Question 4(a) |
| 136 | | Please provide a brief explanation of the actual or potential impact on the environment. (form limit 55 characters) | | Text | | | Question 4(b) |
| 124 | 27 | If this project has an actual or potential impact on the environment, has an exemption been authorized or a environmental impact statement (EIS) been performed? | Check Yes if an exemption has been authorized or an Environmental Assessment (EA) or an Environmental Impact Statement (EIS) been performed and then explain in the Explanation field. Otherwise, check No . | Y / N | Any agency using R&R forms | R&R Other Project Info | Question 4(c) |
| 137 | | Please enter additional details about the EA or EIS. (form limit 55 characters) | | Text | | | Question 4(d) |
| 125 | G6 | Is the research performance site designated, or eligible to be designated, as a historic place? | Check Yes if research occurs in a location designated, or eligible to be designated, as a registered historic place. For more information on Historic Places, go to NSF's AAG Chapter VI.K or http://www.nps.gov/history/laws.htm#pres | Y / N | Any agency using R&R forms | R&R Other Project Info | Question 5 |
| 135 | | Provide a brief explanation for the research performance site designated or eligible to be designated as a historic place. (form limit 55 characters) | | Text | | | Question 5(a) |

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| 126 | H1 | Does this project involve activities outside of the United States or partnerships with international collaborators? | | Y / N | Any agency using R&R forms | R&R Other Project Info | Question 6 |
| 127 | | Identify the countries | Please use the links below to identify the appropriate Country Code: 2-digit ISO Country Code 3-digit ISO Country Code *NSF requires that the countries identified as International collaborators or activities outside of the U.S. are entered in accordance with the NSF Specific International Organization for Standardization (ISO) 2-digit code format . | Text | | | Question 6(a) |
| 138 | | Provide a brief explanation for involvement with outside entities. (form limit 55 characters) | | Text | | | Question 6(b) |
| 2 | 28 | Does this project include a Clinical Trial? | The NIH defines a clinical trial as a prospective biomedical or behavioral research study of human subjects that is designed to answer specific questions about biomedical or behavioral interventions (drugs, treatments, devices, or new ways of using known drugs, treatments, or devices). | Y / N | NIH | PHS 398 Cover Page | Question 2 |
| 3 | 17 | Does this project include a Phase III clinical trial? | <i>This question will not be answered if you select "No" that this project includes a clinical trial.</i> An NIH-defined Phase III clinical trial is a broadly based prospective Phase III clinical investigation, usually involving several hundred or more human subjects, for the purpose of evaluating an experimental intervention in comparison with a standard or controlled intervention or comparing two or more existing treatments. Often the aim of such investigation is to provide evidence leading to a scientific basis for consideration of a change in health policy or standard of care. | Y / N | NIH | PHS 398 Cover Page Supplement | Question 2 |

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| 5 | 18 | Does the proposed project involve human embryonic stem cells? | <p>Indicate "Yes" if the proposed research involves human embryonic stem cells.</p> <p>See Stem Cell Information for more details.</p> <p>Policy: NOTE: In agreeing to the required NIH assurances, the duly authorized representative of the applicant organization certifies that if research using human embryonic stem cells is proposed, the applicant organization will be in compliance with the Notice of Extended Receipt Date and Supplemental Information Guidance for Applications Requesting Funding that Proposes Research with Human Embryonic Stem Cells</p> | Y / N | NIH | PHS 398 Cover Page Supplement | Question 4 |
| 6 | | Can a specific stem cell line be referenced at this time? If stem cells will be used, but a specific line cannot be referenced at the time of application submission, include a statement that one from the registry will be used. | <p>See Stem Cell Information for more details.</p> <p>Policy: See http://stemcells.nih.gov/policy/guidelines.asp for Federal policy statements and guidelines on federally funded stem cell research.</p> | | | | |
| 7 | | List the registration number of the specific cell line(s) from the stem cell registry found at: http://grants.nih.gov/stem_cells/registry/current.htm | <p>The stem cell registry found at: List the registration numbers of the cell lines in the space provided, separated by commas. The maximum allowed length of each registration number is 4. If a specific stem cell line cannot be referenced at this time, enter 'UNKNOWN' as the explanation.</p> <p>Stem Cell Registry</p> <p>Policy: See http://stemcells.nih.gov/info/basics/Pages/Default.aspx for additional information on stem cells.</p> | Text | | | |

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| 114 | 22 | Does this application reflect a change in principal investigator/program director from that indicated on a previous application? | Check Yes if this proposal reflects a change in PI from the one who was indicated on a previous application or award. If Yes , please enter the former PI's last name and first name separated by a Comma in the Explanation field. (Last Name, First Name). | Y / N | NIH | PHS 398 Checklist | Question 2 |
| 115 | | Search and select the former PD/PI | Search the Rolodex for the PI. | Search | | | |
| 116 | 23 | Does this application reflect a change in grantee institution from that indicated on a previous application? | Check Yes if this proposal reflects a change in grantee institution from the one that was indicated on a previous application or award. If Yes , please search for the name of the previous institution. | Y / N | NIH | PHS 398 Checklist | Question 2 |
| 117 | | Search and select the former Institution from the Organization records | Search the Organization table. | Search | | | |
| 118 | 16 | Is this a Renewal Application? | If the proposal is a Renewal, check Yes . | Y / N | NIH | PHS 398 Checklist | Question 3 |
| 119 | | Check "No" if no inventions were conceived or reduced to practice during the course of work under this project. Check "Yes" if any inventions were conceived or reduced to practice during the previous period of support. | | | | | |
| 120 | | If "Yes" (inventions were conceived or reduced to practice) indicate Yes or No as to whether this information has been reported previously to the PHS or to the applicant organization official responsible for patent matters. | | | | | |
| 121 | 29 | If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)? | Select "yes" or "no" to indicate whether disclosure permission is granted. If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)? | Y / N | NIH | PHS 398 Checklist | Question 5 |

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| 133 | 26 | Is assistance being requested under a program that gives special consideration to novice applicants? Yes, No, or Not Applicable? | Check Yes if you meet the requirements for novice applicants specified in the regulations in 34 CFR 75.225 and included on the attached page entitled Definitions for Form ED 424. By checking Yes the applicant certifies that it meets these novice applicant requirements. | Y / N / NA | DED | ED_SF 424 Supplement | Question 2 |
| 110 | 24 | Is the principal investigator participating in this project as an employee of the U.S. Government? | Check Yes if the PI is participating in the proposed project as an employee of the U.S. Government. | Y / N | NASA | NASA Senior/Key Person - Suppl. Data Sheet | Senior / Key Person Name Box |
| 111 | | Select a U.S. Government Agency: | | Search | | | |
| 113 | | Enter the total dollar amount requested (\$) | | Text | | | |
| 112 | 25 | Is the principal investigator participating in this project as an employee of a foreign organization? | Check Yes if the PI is participating in this project as an employee of a foreign organization? Otherwise, check No . | Y / N | NASA | NASA Senior/Key Person – Suppl. Data Sheet | Senior/Key Person Name Box |
| 106 | | Does this project have the potential to affect historic archeological or traditional cultural sites (such as Native American burial or ceremonial grounds) or historic objects (such as a historic aircraft or spacecraft)? | | Y / N | NASA | NASA Other Project Information | |
| 139 | | A brief explanation of the historical impact is required. (form limit 2000 characters) | | Text | NASA | NASA Other Project Information | |
| 108 | | Does this proposed project involve any international participation, either non-U.S. employees or non-U.S. organizations, providing support for facilities, equipment, etc.? (see opportunity instructions for details) | | Y / N | NASA | NASA Other Project Information | |
| 109 | | Please select all that are provided with support (PI, Co-I, Collaborator, Equipment, Facility) | | Search | | | |
| 140 | | A brief explanation of the international participation is required. (form limit 2000 characters) | | Text | | | |

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| 101 | | Will any civil service personnel work on this project? "No" is the required answer. At this time, we cannot support maintaining the mandatory Fiscal Year/Financial support request fields from this questionnaire. | | Y / N | NASA | NASA Other Project Information | |
| 141 | | Please change your prior answer to NO. This version of the questionnaire cannot support the form requirement. A Yes answer will keep the s2s form from validating, barring submission | | Text | | | |