

Proposal Development No: \_\_\_\_\_ Date Due to Sponsor: \_\_\_\_\_ Target Review by date: \_\_\_\_\_ Date Review Completed: \_\_\_\_\_

YES

NO

Has the Program Announcement been reviewed?

What is the proposal mechanism?  F30  F31  F32  F33  Other non- NRSA Programs (F37, F05)

			PROPOSAL TAB REVIEW	Ⓢ - Data Override feature available
YES	NO	N/A		
<input type="checkbox"/>	<input type="checkbox"/>		Does the <b>Title</b> comply with Agency/Sponsor requirements? Ⓢ <ul style="list-style-type: none"> <li>○ A "New" application should have a different title from any other NIH project with the same Fellowship applicant</li> <li>○ A "Resubmission" or "Renewal" should normally have the same title as the previous grant or application</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>		Do the <b>Start</b> and <b>End Date</b> comply with Agency/Sponsor requirements? <ul style="list-style-type: none"> <li>○ Check the NIH Standard Due Dates for Competing Applications webpage for Earliest Project Start Date info (<a href="http://grants.nih.gov/grants/funding/submissionschedule.htm">http://grants.nih.gov/grants/funding/submissionschedule.htm</a>.)</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Proposal Type</b> correct? Ⓢ <ul style="list-style-type: none"> <li>○ New (new application)</li> <li>○ Resubmission (amended or revised budget)</li> <li>○ Renewal (competing continuation of an existing award)</li> <li>○ Revision (supplement to an existing award) – <b>Revisions are generally not applicable to fellowship applications</b></li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>		Is <b>Fellowship/Training Grants (Individual)</b> selected as the <b>Activity Type</b> ? <ul style="list-style-type: none"> <li>○ This activity type will automatically apply a 0% Indirect Cost Rate in the Budget</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>		Is <b>Fellowship</b> selected as the <b>Anticipated Award Type</b> ? Ⓢ	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Sponsor</b> correct? Ⓢ <ul style="list-style-type: none"> <li>○ Specify the Agency you are submitting the proposal to (i.e. NCI)</li> <li>○ Use National Institutes of Health (NIH) only if submitting to multiple Agencies within the NIH</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>		Is " <b>No Prime Sponsor</b> " selected in the <b>Prime Sponsor</b> field? Ⓢ	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Sponsor Proposal No.</b> correct? Ⓢ <ul style="list-style-type: none"> <li>○ Required for Resubmission, Renewal and Any-Changed/Corrected type of applications</li> <li>○ i.e. Federal Identifier (IC &amp; Serial # of prior application/award (e.g. CA654321), etc.</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Award No.</b> complete? Ⓢ <ul style="list-style-type: none"> <li>○ For Renewal and Continuation type of submissions</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>NSF Code</b> correct?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Original Proposal</b> selected? <ul style="list-style-type: none"> <li>○ For Any Changed/Corrected, Resubmission, and Renewal type of submissions</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the correct type of <b>Notice of Opportunity</b> selected? Ⓢ <ul style="list-style-type: none"> <li>○ i.e. Unsolicited, Solicited, Verbal Request for Proposal, etc.</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Funding Opportunity Number</b> correct?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If this proposal is a Change/Corrected application, is the <b>Previous Grants.gov Tracking ID</b> field completed with the correct Grant Tracking Number? Ⓢ	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Subcontract</b> box checked? Ⓢ <ul style="list-style-type: none"> <li>○ If the box is checked verify with the Department to ensure that a subcontract is really being issued under this Fellowship.</li> </ul>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the status indicator for the Narrative marked as Incomplete?	

			GRANTS.GOV SECTION REVIEW
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For <b>Changed/Corrected</b> applications, is the correct <b>Submission Type</b> selected?
<input type="checkbox"/>	<input type="checkbox"/>		Is the proposal connected to a <b>valid Grants.gov Opportunity</b> ? <ul style="list-style-type: none"> <li>○ i.e. Closing Date has not passed, the correct version of the forms is being used, etc.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Are all the required Grants.gov forms set to " <b>Include</b> "?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If human subjects are involved with the project, are the <b>Planned Enrollment Report</b> and/or the <b>PHS 398 Cumulative Inclusion Enrollment Report forms</b> set to " <b>include</b> "?

			ORGANIZATION TAB REVIEW
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is <b>Other Organization/ Performance</b> site entered?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do all Organizations have a <b>DUNS Number</b> ?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does every Organization and/or Performance Site have a <b>Congressional District</b> entered and in the correct format (i.e. RI-001)?

MAILING INFO TAB REVIEW			
YES	NO		
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Deadline Date</b> and <b>Type</b> correct? <i>(Confirmed with Program Announcement?)</i>
INVESTIGATOR TAB REVIEW			
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Fellowship Applicant</b> assigned the role of <b>PI</b> ? <ul style="list-style-type: none"> <li>Only the Individual applying for the fellowship should be listed in the Investigator Tab (unless otherwise instructed by the FOA)</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Effort</b> for the PI listed? <i>(% of effort based on 12 months and averaged over the life of the project)</i>
KEY PERSON TAB REVIEW			
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Are <b>sponsors, co-sponsors, collaborators and/or doctoral dissertation advisors</b> included?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If applicable, are the <b>Efforts</b> for all Brown Key Personnel listed? <ul style="list-style-type: none"> <li>% of effort based on 12 months and averaged over the life of the project</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Are the <b>Roles</b> for all Key Personnel correct? <ul style="list-style-type: none"> <li>Make sure that the role entered is the individual's role on the project and not their title</li> <li>i.e. sponsor, co-sponsor, collaborator and/or doctoral dissertation advisor</li> </ul>
SPECIAL REVIEW TAB			
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Are <b>Human Subjects</b> involved? <ul style="list-style-type: none"> <li>If approval status is "Approved" make sure the Approval Date is entered, if it is "Exempt", make sure the exemption code is entered in the Special Review Comment box and the Exemption date is entered in the Appr. Date field.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the <b>Human Subjects</b> approval status is " <b>Approved</b> " or " <b>Exempt</b> ," have you <b>verified with RPO</b> to make sure that the appropriate <b>IRB approval</b> is in place for this project?
<input type="checkbox"/>	<input type="checkbox"/>		Are <b>Vertebrate Animals</b> involved? <ul style="list-style-type: none"> <li>If "YES", make sure the approval status is selected</li> <li>If approval status is "Approved" make sure the Approval Date is entered</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the <b>Vertebrate Animals</b> approval status is " <b>Approved</b> ," have you <b>verified with RPO</b> to make sure that the appropriate <b>IACUC approval</b> is in place for this project?
SCIENCE CODE TAB REVIEW			
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is/are <b>Science Code(s)</b> selected? <i>(required for Bio-Med)</i>
ABSTRACT SECTION REVIEW			
YES	NO		
<input type="checkbox"/>	<input type="checkbox"/>		Is the Brown specific abstract appropriate/relevant to the proposal?
YES/NO QUESTIONS SECTION REVIEW			
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Have the <b>Yes/No Questions</b> been reviewed?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is <b>Yes/No question 0B16</b> <i>(Is the F&amp;A rate applied in proposal budget the maximum F&amp;A rate allowed by the sponsor?)</i> answered " <b>NO</b> "? If "NO", make sure that the signed Cost Share Approval Form is uploaded in the Narrative Section, the information is correctly reflected in the Budget and the Cost Sharing – Indirect Cost Questionnaire is answered correctly. Add a note in the Coeus Note Pad as necessary.
QUESTIONNAIRE SECTION REVIEW ***NOTE*** To view the list of the Questionnaire Questions please visit: <a href="http://research.brown.edu/osp/coeus/PD_Documents/PHS_Fellowship_Questionnaire.pdf">http://research.brown.edu/osp/coeus/PD_Documents/PHS_Fellowship_Questionnaire.pdf</a>			
YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>PHS Fellowship Questionnaire</b> complete?
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>NIH Additional Investigator(s) Questionnaire</b> complete?
<input type="checkbox"/>	<input type="checkbox"/>		Have all the <b>Brown and Non-Brown Investigators</b> been identified in the <b>NIH Additional Investigator(s) Questionnaire</b> ?
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Grants.gov Questionnaire</b> section complete?
<input type="checkbox"/>	<input type="checkbox"/>		Have the answers on the <b>Grants.gov Questionnaire</b> been reviewed?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Cost Sharing – Direct Cost Questionnaire</b> complete? <ul style="list-style-type: none"> <li>This Questionnaire must be completed whenever there is Cost Share identified in the Budget.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If " <b>IN KIND</b> " Cost Share has been included in the proposal, is it appropriately documented on the Cost Sharing Commitment Form uploaded in the Narrative Section?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If " <b>Equipment Funded by OVPR</b> " Cost Share has been included in the proposal, is it appropriately documented on the Cost Sharing Commitment Form uploaded in the Narrative Section?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Cost Sharing – Indirect Cost Questionnaire</b> complete? <ul style="list-style-type: none"> <li>o This Questionnaire must be completed whenever there is Indirect Cost - Cost Share identified in the Budget. (under-recovery is greater than 1 and YNQ 0B16 is answered as "NO".)</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the <b>Indirect Cost – Cost Sharing</b> appropriately documented in the Cost Sharing Commitment Form uploaded in the Narrative Section? <ul style="list-style-type: none"> <li>o Whether the under-recovered F&amp;A is being funded by OVPR and/or by the Department, it must be appropriately documented in the Cost Sharing Commitment Form uploaded in the Narrative Section.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Have all the <b>Questionnaires Questions</b> been reviewed?

**PROPOSAL PERSONNEL SECTION REVIEW**

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Are the <b>Biosketches</b> uploaded for each individual?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If required, are the <b>Current and Pending Support</b> documents uploaded for each individual? <ul style="list-style-type: none"> <li>o Unless otherwise required in a specific FOA, do not use this attachment upload for NIH and AHRQ</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Are the attachments in <b>correct format</b> per FOA instructions?
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>address</b> complete for each individual? <ul style="list-style-type: none"> <li>o i.e. 9 – digit Postal Code, Phone Number, E-Mail Address</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Citizenship Information</b> selected for the <b>PI (Fellow)</b> ?
<input type="checkbox"/>	<input type="checkbox"/>		Have you <b>verified with eRA Commons</b> to see if the eRA Commons User Name is correct for the <b>PI (Fellow)</b> ?
<input type="checkbox"/>	<input type="checkbox"/>		Does the Fellowship Applicant (PI) hold a <b>PI account in eRA Commons</b> ? <ul style="list-style-type: none"> <li>o The eRA Commons Postdoctoral Role should <b>NOT</b> be used for Individual Fellowship applicants</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Have you <b>verified with eRA Commons</b> to see if the eRA Commons User Name is correct for the <b>Sponsor</b> ? <ul style="list-style-type: none"> <li>o Also, Individuals identified as Sponsors on the application are required to have the Sponsor Role in eRA Commons.</li> </ul>

**DEGREE DETAILS SECTION REVIEW**

**\*While in the Proposal Personnel Section, select the Individual and then select [Edit → Degree Info](#) from the Menu Bar**

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Degree Information</b> entered for the <b>PI</b> and each <b>Senior/Key Person</b> ?

**NARRATIVES SECTION REVIEW**

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Are all the <b>required attachments</b> uploaded in accordance with the Program Announcement? <ul style="list-style-type: none"> <li>o i.e. Correct sections and sub-sections within the attachments, page limitations</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Are the attachments uploaded under the <b>correct Narrative Type</b> ?
<input type="checkbox"/>	<input type="checkbox"/>		Are the attachments in the <b>correct format</b> per Agency/Sponsor guidelines? <ul style="list-style-type: none"> <li>o i.e. Correct font, page limitations, lines per inch, margins, etc.</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Is the <b>Cover Letter</b> uploaded?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are all required <b>"Other Attachments"</b> included? <ul style="list-style-type: none"> <li>o i.e. Foreign Sponsorship, Collaborators and Dissertation Advisor(s), Certification Letter for Pre-doctoral Fellowships (F31) to Promote Diversity</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If <b>"Other" Narrative Type</b> is included, is the <b>Module Title</b> correct? <ul style="list-style-type: none"> <li>o i.e. No spaces and/or special characters, correct spelling</li> </ul>

**USER ATTACHED S2S FORMS**

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are the appropriate User Attached S2S forms attached? <ul style="list-style-type: none"> <li>o i.e. Planned Enrollment Report and/or PHS398 Cumulative Inclusion Enrollment Report</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If more than one study is indicated on the <b>Planned Enrollment Report</b> and/or <b>the PHS398 Cumulative Inclusion Enrollment Report form</b> , are the required fields completed for each study?
<input type="checkbox"/>	<input type="checkbox"/>		Are the attachment forms completed in accordance with the Sponsor's instructions?
<input type="checkbox"/>	<input type="checkbox"/>		In the User Attached S2S forms window, does each attached form have a green check mark in the XML field?

**DETAILED BUDGET SECTION REVIEW**

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		Are the appropriate <b>FY</b> represented in the Rates Table?
<input type="checkbox"/>	<input type="checkbox"/>		Are the standard <b>University Approved Rates</b> used? ( <i>The Institute Rate column in the Rates Table</i> )
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the standard <b>University Approved Rates</b> are not used, are the <b>modified rates justified</b> ? ( <i>The Applicable Rate column in the Rates Table</i> )
<input type="checkbox"/>	<input type="checkbox"/>		Is the correct <b>F&amp;A Rate</b> applied based on the Agency/Sponsor guidelines and does it correspond with <b>Yes/No question 0B16</b> ?

<input type="checkbox"/>	<input type="checkbox"/>		Are the <b>correct Line Items</b> used in the Budget? <ul style="list-style-type: none"> <li>o Fellowship budget should be build using Cost Elements/Line Items that begin with “f”</li> <li>o e.g. <b>f) Travel (Fellow/Trainee), f) Stipend – Post-Doc (Fellow/Trainee), etc.</b></li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Is/are the correct amount(s) entered for the <b>Fellow Stipend(s)</b> ? <ul style="list-style-type: none"> <li>o To view the current Stipend Levels please visit NRSA Stipend Levels by Fiscal Year information located at: <a href="http://grants.nih.gov/training/nrsa.htm">http://grants.nih.gov/training/nrsa.htm</a> (bottom of the page)</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>		Is this a <b>Senior Fellowship Application</b> ? <ul style="list-style-type: none"> <li>o If this is a Senior Fellowship Application, please answer the following 5 questions marked with *, otherwise the questions do not apply</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*For <b>Senior Fellowship Applicant</b> , is the individual entered correctly in the <b>Budget Persons Window</b> ? ( <i>correct appointment type, eff. date and base salary</i> )
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*If this is a <b>Senior Fellowship Applicant and a stipend is being requested</b> , is the Senior Fellowship Applicant entered into the <b>Stipend – Senior Fellow (Fellowship Only)</b> line item?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*In the <b>Stipend – Senior Fellow (Fellowship Only) Personnel Budget Details</b> , does the individual have the correct <b>start and end dates</b> entered?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*In the <b>Stipend – Senior Fellow (Fellowship Only) Personnel Budget Details</b> , does the individual have the correct <b>Period</b> selected?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*In the <b>Stipend – Senior Fellow (Fellowship Only) Personnel Budget Details</b> , does the individuals have the correct <b>%Charged and %Effort</b> entered?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there <b>Cost Sharing</b> ?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If <b>Cost Sharing</b> consists of <b>both</b> NIH Salary Cap <b>and</b> salary charged to the project for the same individual, has the salary charged to the project been entered in the budget using a <b>non-NIH Salary Cap Cost Element</b> ?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the proposal contains <b>non-Brown Cost Sharing</b> , (i.e. collaborating organization cost sharing that is not a Subcontract), has the “ <b>Non-Brown Cost Share</b> ” <b>Cost Element</b> been used? (All dollars should be in the Cost Share field)?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If there is any Cost Sharing from a Subcontract, is the Cost Share amount entered in the Subcontract line items?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If there is <b>Cost Sharing</b> , is the “Submit Cost Sharing” box checked on the Budget Summary tab? <sup>Ⓣ</sup> <i>(Should only be checked if Cost Sharing is being submitted to Sponsor.)</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If there is Cost Sharing, are the applicable <b>Questionnaires answered</b> ? (Cost Sharing – Direct Cost and Cost Sharing – Indirect Cost – when applicable)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If there is Cost Sharing, is/are the <b>approval(s)/Salary Cap Worksheet</b> uploaded in the Narrative Module?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For multi-year proposals, are <b>all Budget Periods</b> generated?

<b>OTHER TAB REVIEW</b>		
YES	NO	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	

<b>GRANTS.GOV SECTION REVIEW</b>		
YES	NO	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

<b>SUMMARY</b>		
YES	NO	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>NON-BROWN INVESTIGATOR FINANCIAL CONFLICT OF INTEREST</b>		
<i>**NOTE** If the proposal includes non-Brown Individual Investigators from any institution including from Lifespan (ex: Primary Mentor), please flag the Questionnaire and give the proposal to the Administrative Manager after submission.</i>		
YES	NO	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

			<ul style="list-style-type: none"> <li>○ If yes, no additional forms needed</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For <b>each subrecipient institution</b> (other than Lifespan) <b>NOT</b> identified on the FDP Clearinghouse, is a <b>“Subrecipient Certification...” form attached in the Narrative Section?</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has <b>each “Subrecipient Certification...” form</b> been reviewed?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has <b>any subrecipient institution</b> checked <b>Part I, Box B?</b> <ul style="list-style-type: none"> <li>○ <b><i>If YES, please flag the form and give the proposal to the Administrative Manager after submission</i></b></li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For <b>each non-Brown Investigator</b> included as an <b>individual Investigator</b> (including from Lifespan), is an <b>“Assurance of Compliance” form attached in the Narrative Section?</b> <b><i>If any individual investigators are included, please flag the form and give the proposal to the Administrative Manager after submission</i></b> <b><i>*NOTE* any “Primary Mentor is automatically considered an Investigator, and must submit an “Assurance of Compliance” form.</i></b>

**COMMENTS/CORRECTIONS**  **Please discuss with your Supervisor prior to REJECTING a Proposal!**

YES    NO    N/A  
       

Communicated the necessary comments to the department administrator and PI for corrections/follow-up on \_\_\_\_\_ via:  
 Rejection Comments field in COEUS     E-Mail     Phone