

Supplement Form A

to Sponsored Programs Application Approval Sheet

(fill out form for each unit to be assigned a separate task
and attach to Application Approval Sheet)

Co-Investigator or Task Manager College/Department

Task Name _____
(20 characters or less, must be **different** for each task under a project)

Departmental Activity (D/A) Name _____
(9 digit number and name example: 236010000,Exec Dir Research Corp Spon Activity)

Business Office Award Manager _____
(**name** of budget **person** or responsible EBO person)

Line item detail for current project year:

Benefit eligible salaries	-	_____
Fringe benefits (rate used _____%)	-	_____
Nonbenefit eligible salaries	-	_____
Fringe benefits (rate used _____%)	-	_____
Graduate Assistants	-	_____
Fringe benefits (rate used _____%)	-	_____
General	-	_____
Subcontract	-	_____
Travel	-	_____
Repairs/Alterations	-	_____
Equipment < \$5,000	-	_____
Equipment > \$5,000	-	_____
F & A (rate used _____%)	-	_____
Total for task	-	_____

Cost-sharing detail associated with this task:

(Give the item being cost-shared or the name of the person whose salary is being cost-shared, the percent time and salary used in the space provided.)

Last Name or Item	\$ Amount	DA No.	Oracle Fund No. (example: 11100037 or C100175W) or Award No.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Cost-sharing total for this task \$ _____