REQUEST FOR PREAWARD ACCOUNT NUMBER

Date:

To: Comptroller's Office

From: Office of Sponsored Programs (OSP)

Our office has received a request to issue an account number to which expenses may be charged. This request is for a project entitled
under the direction of in the Department or Unit of .

To initiate/continue effort on this project, it will be necessary for the Project Director/Principal Investigator to have access to an account prior to actual award. **It is understood that the originating unit's DRIF resources will be used to reimburse the UMBC central accounts for any resulting deficit if for any reason the agreement does not materialize.**

Account number to be charged if agreement is not signed:

TO THE DEPARTMENT: Please return the original of this executed letter to OSP. An account number cannot be issued until OSP receives this document and a complete copy of the proposal is on file.

Funding agency: Name of agency contact:

Phone number of agency contact:

_____ _____

Principal Investigator/ Project Director Date Director/Dept. Chair Date

_____

Dean or Reporting Line Date

New Grant (Y/N)

Renewal (Y/N) If yes, renewal of Account #

Non-competing continuation (Y/N) If yes, renewal of Account #

Start Date End Date

Project Location On campus Off campus

Indirect Cost Rate Indirect Cost Base

Research Training Service

_____

Office of Sponsored Programs