

Department of Geology INTERNAL ROUTING FORM FOR PROPOSALS

This form is for internal purposes only. The information gathered on this form will be used to complete the KR Routing process. No signatures are required at this time. The KR certification has replaced required signatures on the routing form.					
1. Proposal Title:					
2. a. Start Date: (mm/dd/yyyy)b. End Date: (mm/dd/yyyy)					
3. Proposal/Application Type:					
□ New □ Renewal □ Continuation □ Revision □ Resubmission					
	If not new: Related Proposal Number Related KFS Number:				
4. Activity Typ	be:				
Research Training/Instruction Fellowship IGPA Service/Other Sponsored Activity Basic Development Applied Clinical Trial					
5. Sponsor:					
a. Contact Name and Address					
Name Address					
b. Flow through : Is UMD a subcontractor? Yes No					
If yes , who will UMD subcontract to?					
Name:		email:	Ph	Phone:	
6. Deadline Date for Proposal:					
URL for Announcement, etc					
7. Submission Instructions: Electronic Submission, system:					
□ Fastlane □ Nspires □ Grants.gov Other:					
8. If multiple departments are involved, name of administering department:					
9. Principal Investigator/Co-Principal Investigator(s) NOTE : All accounts created for any award resulting from this proposal will follow the credit split information listed below.					
PI	Name:			% Credit for Project:	
	College:	Departmen		% Credit for Investigator:	
	College:	Departmen	t:	% Credit for Investigator: Unit total for Investigator:	
				100%	
Co-I	Name:			% Credit for Project:	
0-1	College:	Departmen	t:	% Credit for Investigator:	
	College:	Departmen		% Credit for Investigator:	
		· ·		Unit total for Investigator: 100%	

Is this a pre-proposal submission? □ Yes □ No

Is this a MPowering the State (MTS) proposal? □ Yes □ No

Is part of this project to be subcontracted to another organization? \Box Yes \Box No

If yes, please provide Name and Address of subcontractor.

Is any of the UM portion of this project to take place off-campus for a minimum of 3 consecutive months?

(*Please note:* This does not include work conducted at GSFC or another institution for your project. You would select "yes" only if you will be off-campus (for example, in China) for three consecutive months without retuning to UMCP.) □ Yes □ No

If yes, please provide location information below.

Does this project require work at a UM Research Farm? □ Yes □ No

Does this project require field work? Field work includes all off-campus urban and remote settings not associated with another institution or UM Research Farm.

Are there additional resources (space, operating or equipment funds, utility service) required to conduct this project over and above those already budgeted for or approved by your department?

Will this project involve the construction or renovation of a Biosafety Level -2 (BSL-2) or BSL-3 laboratory? \Box Yes \Box No

Will this project require the significant alteration of a chemical fume hood, laboratory local exhaust system, electrical, plumbing, or building structure? □ Yes □ No

Does this proposal include administrative support costs such as administrative/clerical salary and/or office supplies/communication costs? If yes, proposal budget must include explicit justification of these costs in accordance with UMCP Policy VIII-10.40(A).

Does the proposal include a tuition or fee waiver on academic year, winter term, or summer programs? If yes, documentation of approval from the Office of Provost, Dean for Undergraduate Studies, or Office of Summer & Winter Terms must be provided with the proposal.

□ Yes □ No

Does this project offer courses for credit? \Box Yes \Box No

If yes, have the courses for credit been approved by Academic Affairs? □ Yes □ No

List the courses for credit.

Is there a real or potential conflict of interest in connection with this work or this sponsor (including consulting) involving a University of Maryland employee, as defined by the <u>University of Maryland Policies and Procedures II-3.10(A)</u> or <u>II-3.10(B)</u> (<u>https://research.umd.edu/coi</u>)? If yes, a disclosure form must be completed and submitted in accordance with these procedures.

🗆 Yes 🛛 No

Are any export controls, physical or IT security requirements, restrictions on publications, or use of foreign nationals indicated in the solicitation or in discussions with the sponsor?

Are there technologies involved in this project which are likely to have a military application or other applications which could be considered to have national security implications? Yes No

Will your project involve the shipment of equipment outside of the US? $\hfill Yes \hfill No$

If yes, list materials and locations.

Will your project require collaboration with any foreign entity? \Box Yes \Box No

If yes, please provide collaboration information below (name, company, location).

Will this project involve any information which may not be released to the public without sponsor approval? This may include, but is not limited to, sensitive research results, data sets, proprietary information, trade secrets, publications, and exportcontrolled information.

🗆 Yes 🛛 No

If yes, will such information be subject to a nondisclosure agreement or any other agreement authorizing a sponsor or other party to withhold from publication information provided to UM? \Box Yes \Box No

Will this research include using Human Subjects? □ Yes □ No

If yes, has an IRB application been submitted to the IRB office for this project? \Box Yes \Box No

Will this research include using vertebrate animals? \Box Yes \Box No

If yes, has an IACUC application been submitted to the IACUC office? In response to "Will this research include using vertebrate animals?"

Will radioactive materials (H-3, C-14, P-32, gamma irradiator, etc) be used in this research? Yes No

Will devices which produce ionizing radiation (x-ray units, electron microscopes, particle accelerators, etc.) be used in this research?

□ Yes □ No

Will a source of non-ionizing radiation (lasers, infra-red devices, ultraviolet devices, radio frequency devices, other electromagnetic devices, and/or microwave devices) be used in this research?

If yes, please list the type of non-ionizing radiation that will be used.

Laser(s) Radio Frequency devices Infra-red devices (other than lasers) Ultraviolet devices (other than lasers) Other Electromagnetic devices Microwave devices

Will this research use biological materials? recombinant or synthetic nucleic acids; human pathogens; biological toxins; human blood; unfixed human tissue; human cell culture; unfixed tissue from non-human primates.

Will this research require the use of one or more of the following select agent toxins: e.g. Abrin; Botulinum neurotoxins; Short, paralytic alpha conotoxins; Diacetoxyscirpenol (DAS); Ricin; Saxitoxin; Staphylococcal enterotoxins (Subtypes A, B, C, D, and E); T-2 toxin; Tetrodotoxin?

Will this project require the use of chemicals? If this project includes the use of chemicals, a Chemical Hygiene Plan and training is required.

If yes, please answer questions a-c below.

- a) Will this project require the use of toxic or pyrophoric gases? Toxic gases have NFPA health hazard ratings of 3 or 4, or a rating of 2, if the gas lacks physiological warning properties. A pyrophoric gas is defined as having an autoignition temperature in air at or below 130F (54.4C)

 Yes
 No
- b) Will this project require the application of registered pesticides by UMD personnel?
 □ Yes □ No
- c) Will this project require the use of controlled substances?
 □ Yes □ No
- d) Will this project require the use of explosive materials (as defined by the US Department of Alcohol, Tobacco & Firearms)?

🗆 Yes 🛛 No

Will this project require the shipment or transfer of chemical, biological, or radioactive materials off-campus? Yes No

Will this project require the use of a respirator by research personnel due to an airborne hazard not managed by engineering controls (e.g., use of chemical fume hood)? Yes No

Will this project require SCUBA diving? □ Yes □ No

Will this research require the use of boats? \Box Yes \Box No

If yes, will a motorized boat be operated by UMD personnel/affiliate in relation to this project? □ Yes □ No