

UNLV School of Nursing and Allied Health Sciences Notice of Intent to Submit Grant Proposal Form

Please complete as much of the Notice of Intent as possible. The information provided here will help the Office of Research Support staff prepare to assist you with proposal development and submission.

Today's Date: _____

Principal Investigator: _____

School/Department: _____

UNLV E-mail Address: _____

Extension:

1. Name of funding agency (sponsor): _____

a. Proposal submission deadline (if the sponsor has no deadline, indicate planned submission date):

b. Link to program announcement: _____

c. Proposed title of study: _____

2. Will you have buy-out? ☐ Yes ☐ No

a. If you answered yes, have you consulted with your department chair prior to submitting a letter of intent? ☐ Yes ☐ No

Please submit to Kirsten Speck (Kirsten.speck@unlv.edu)