

## PROPOSAL TRANSMITTAL FORM – PTF PI/CO-PI ROLE



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### PURPOSE

*The purpose of this document is to review PTF information, complete Conflict of Interest Form, and approve the PTF.*

### STEPS

**\*\*Please note that the Proposal Transmittal Form needs to be accessed from an on-campus computer. If you are **not** using an on-campus computer, you must first connect to the Boston College Virtual Private Network. Instructions on using BC VPN can be found at the following link:**

<https://www.bc.edu/offices/help/getstarted/network/vpn.html>. Please proceed to step 1.\*\*

Extra line breaks in this message were removed.

From: finupg@bc.edu  
 To: Daniel Terminello  
 Cc:  
 Subject: PTF Approval Required - Applications & Architect Svcs

Proposal Transmittal Form has been submitted which requires your attention for Approval.

PROPOSAL ID: 87

PROPOSAL TITLE: Test #87

DEPARTMENT: 027521 Applications & Architect Svcs PI NAME: Gerard Keough

URL: [https://psfawu.bc.edu:8442/psp/FINUPG/EMPLOYEE/ERP/c/BC\\_CUSTOM.BC\\_PROPOSAL.GBL?Page=BC\\_PROPOSAL&Action=U&BUSINESS\\_UNIT=GRANT&PROPOSAL\\_ID=87&VERSION\\_ID=P1](https://psfawu.bc.edu:8442/psp/FINUPG/EMPLOYEE/ERP/c/BC_CUSTOM.BC_PROPOSAL.GBL?Page=BC_PROPOSAL&Action=U&BUSINESS_UNIT=GRANT&PROPOSAL_ID=87&VERSION_ID=P1)

1. Upon receipt of email notification please access the PTF via one of the following methods:
  - a. If already logged into PeopleSoft Financials – Click on the blue hyperlink in the email notification.
  - b. If not logged into PeopleSoft Financials, please use the following link to log in to PeopleSoft Financials: <https://psfinawp.bc.edu/FINPRD/signon.html>. Please note that you must use your **Agora credentials** to log in. If you are having difficulty logging in, please try logging in using a different browser. If this does not work, please contact your OSP Pre-Award administrator.

2. Navigation: **Grants > Proposal Form > Find an Existing Value**

**Proposal Form**

Enter any information you have and click Search. Leave fields blank for a list of all values.

**Find an Existing Value** **Add a New Value**

**Search Criteria**

**Business Unit:** begins with ▾ GRANT 🔍

**Proposal ID:** begins with ▾ 16

**Version ID:** begins with ▾


**Short Title:** begins with ▾

**Date From:** = ▾ [calendar icon]

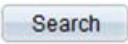
**Date To:** = ▾ [calendar icon]

**Proposal Status:** = ▾

Case Sensitive

**Search** **Clear** [Basic Search](#)  [Save Search Criteria](#)

## 3. Type in or Click

- a. Business Unit = "GRANT"
- b. Enter Proposal ID
- c. Click 

Proposal Form Step 1/7

1 2 3 4 5 6 7 < Previous Next >

### Proposal Form and PI Details

\* Fields are Required, Please enter all required fields before submitting the proposal, you can save proposal without required fields.

Business Unit: GRANT      Version: P1  
 Proposal Form ID: 16      Proposal Status: Pending Approval Print PDF

**Proposal Details**

\*Proposal Title: Advances in Molecular Relaxation and Interaction Process      \*Type: New  
 \*Purpose: BARE Basic Research      Sponsor Award #:   
 \*Proposal Start Date: 04/01/2014      Solicitation #:   
 \*Proposal End Date: 03/31/2015      Current Award #:   
 \*Sponsor: G300000 National Science Foundation-LOC      \*Due Date: 03/15/2014  
 Prime Sponsor:   
 OSP Proposal ID:   
 Created By: Lori St Peter      Allow Multiple PIs:

**Proposal Projects**

Sequence #: 1  
 \*Institution: BCOSP Boston College  
 \*Department: 053321 Chemistry  
 \*Subdivision: 053321 Chemistry

**PI & Co-PI's Information**

PI/Co-PI	*PI Employee ID	Name	Contact PI	Primary PI	Phone	Email	Institution	Department ID	Subdivision	Location
PI	82994927	Comvalius-Goddard,Sharon	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	617/652-8259	comvaliu@email.bc.edu		053321		13601504

**CFDA**

CFDA	Program Title	Primary
		<input type="checkbox"/>

4. Review Proposal Form details and click

Next >

Proposal Form Step 2/7

1 2 3 4 5 6 7 < Previous Next >

### Personal Conflict of Interest

All questions are required, please answer all questions before moving to next page.

Business Unit: GRANT      Proposal Form ID: 16

**Disclosure Statement**

Employee ID: 82994927 Comvalius-Goddard,Sharon  
 Project Role: Principal Investigator  
 Department: 053321 Chemistry  
 Sponsored Project Title: Advances in Molecular Relaxation and Interaction Process  
 Name of Funding Sponsor: G300000 National Science Foundation-LOC  
 Project Begin Date: 04/01/2014  
 Project End Date: 03/31/2015

**Important Note to Principal Investigators:** Compliance with the PHS regulation requires disclosures from all "investigators" who are defined as "the project director or principal investigator and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of the research funded by the PHS, or proposed for such funding, which may include, for example, collaborators or consultants." Please identify on the last page of this form those that you consider to fall within this definition for this project.

5. Enter Project Role

6. Select Department

Please Respond by Checking the appropriate boxes:

**Conflict of Interest:**

1. Are you or any member of your immediate family (spouse or domestic partner and/or dependent children) an officer, director, partner, trustee, Employee, advisory board member, or agent of (a) the external organization funding this Sponsored Project or (b) any external organization from which goods and services will be obtained under this Sponsored Project (including those to which you may be subcontracting a portion of the project work), (c) any external organization whose financial condition could benefit from the results of this Sponsored Project, or (d) any external organization having business dealings in an area related to the work under this Sponsored Project?

Yes (if so, describe in detail the nature and extent of the association in the text box below).  
 No

2. **Publicly-Traded Entities:**

Have you or any member of your immediate family derived income within the past year of \$5,000 or more in a publicly-traded entity, or in the past year have you or any member of your immediate family owned equity interests in a public-traded interest, the fair market value of the equity being \$5,000 or more?

Yes (if so, do any of the following pertain, and if so, provide a full description):  
 No

3. **Non-Publicly Traded (i.e. Privately Held) Entities:**

Have you or any member of your immediate family derived income within the past year of \$5,000 or more in a non- publicly traded entity, or in the past year have you or any member of your immediate family owned any equity interests in a non-publicly traded entity?

Yes (if so, do any of the following pertain, and if so, provide a full description):  
 No

4. **Reimbursed or Sponsored Travel:**

In the past twelve months, did you engage in any travel the costs for which were reimbursed to you or paid for you by an external entity. You do NOT have to disclose such travel from the following types of entities: by a federal, state, or local government agency, an Institution of higher, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.

Yes (if so, disclose the name of the external entity, the time of the travel, the purpose of the travel, and the amount reimbursed or sponsored).  
 No

7. Complete Conflict of Interest portion of the form by checking the appropriate boxes

**Conflict of Commitment:**

1. Are you employed by or do you have any personal business affiliation with an external organization whose interests are related to this project?

Yes (if so, describe on an attached page the name of the external organization, the time commitment of the employment or personal business affiliation, the nature of the business relationship, and the amount of compensation you derive from such employment or personal business affiliation).  
 No

2. Do you have a personal business affiliation the scope of which covers identical or similar work that will be funded by a sponsored agreement to the university?

Yes (if so, describe on an attached page the name of the external organization, the nature of the affiliation, the amount of time you dedicate or will dedicate to it, and the amount of compensation you derive from such employment or personal business affiliation).  
 No

3. Have you involved or will you involve any student to assist you in the work covered by a personal business affiliation with an external organization?

Yes  
 No

4. Will any university resources, including facilities, personnel, equipment, or confidential information be used in an employment or personal business affiliation with an external organization identified in response to Question 1 above?

Yes  
 No

5. Does this project involve research with human participants?

Yes  
 No

8. Complete Conflict of Commitment portion of the form by checking the appropriate boxes

Certification: I have read and understand the Addendum to the Boston College [Conflict of Interest and Commitment Policy Pertaining to Sponsored Projects](#). I agree to submit a revised disclosure in the event that conditions change which would revise my response to any of the questions above.

Agree

Date: 02/10/2014

Name: Comvalius-Goddard, Sharon

9. Check the I agree box and click save

+

Proposal Form Step 2/7

1 2 3 4 5 6 7 < Previous Next >

### Personal Conflict of Interest

All questions are required, please answer all questions before moving to next page.

Business Unit: GRANT Proposal Form ID: 16

**Disclosure Statement**

Employee ID: 82994927 Comvalius-Goddard, Sharon

Project Role: Principal Investigator

Department: 053321 Chemistry

Sponsored Project Title: Advances in Molecular Relaxation and Interaction Process

Name of Funding Sponsor: G300000 National Science Foundation-LOC

Project Begin Date: 04/01/2014

Project End Date: 03/31/2015

**Important Note to Principal Investigators: Compliance with the PHS regulation requires disclosures from all "investigators" who are defined as "the project director or principal investigator and any other person, regardless of title or position, who is responsible for the design, conduct, or reporting of the research funded by the PHS, or proposed for such funding, which may include, for example, collaborators or consultants." Please identify on the last page of this form those that you consider to fall within this definition for this project.**

10. Click Next >

Proposal Form Step 3/7

1 2 3 4 5 6 7 < Previous Next >

### Add person for Col

Please enter persons you think should fill Conflict of Interest.

Business Unit: GRANT Proposal Form ID: 16

Proposal Projects Find | View All First 1 of 1 Last

Sequence #: 1

**Add Employees for Conflict on Interest Form**

Empl ID	Name	Date Email Last Sent	Send Email?		
111078234	Terminello, Daniel		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**View Col Details** Find | First 1 of 1 Last

Employee ID	Name	View Content
82994927	Comvalius-Goddard, Sharon	<a href="#">View Content</a>

Send COI Emails

Save Return to Search

11. Select or Click
- Select Empl ID
  - Click Send COI Emails. Email will be sent to selected individuals with instructions on how to locate and complete the COI.
  - Click Next

Proposal Form Step 4/7

1 2 3 4 5 6 7 < Previous Next >

### Enter Budget Details

Please enter all required fields before moving to next page.

Business Unit: GRANT Proposal Form ID: 16

Proposal Projects Find | View All First 1 of 1 Last

Sequence #: 1

Proposal Project Budget Details Find | View All First 1 of 1 Last

Budget ID: STANDARD

Budget Period - Year 1	Budget Period - All Years	Applied Rates - Percentage
Total Direct Costs: \$143,770	Total Direct Costs: \$143,770	FT Exempt 27.70
F&A (Indirect) Costs: \$81,230	F&A (Indirect) Costs: \$81,230	FT Non-Ex 44.50
Total Request: \$225,000	Total Request: \$225,000	PT All 7.65
Total Cost Sharing:	Total Cost Sharing:	F&A Base MTDC
Total Proposal Value: \$225,000	Total Proposal Value: \$225,000	F&A Rate 56.50

Save Return to Search

12. Review budget details and click 'Next'

Proposal Form Step 5/7

1 2 3 4 5 6 7 < Previous Next >

### Certification

Please check all applicable and enter all required fields before moving to next page.

Business Unit: GRANT Proposal Form ID: 16

Proposal Projects Find | View All First 1 of 1 Last

Sequence #: 1

Administrative and Regulatory Concerns Find | View All First 1 of 1 Last

<input checked="" type="checkbox"/> Human Subjects	<input checked="" type="checkbox"/> Animals	<input checked="" type="checkbox"/> Information Technology
<input checked="" type="checkbox"/> Hazardous Materials	<input checked="" type="checkbox"/> Radioactive Materials	<input checked="" type="checkbox"/> Faculty Buy-out
<input checked="" type="checkbox"/> Select Agents	<input checked="" type="checkbox"/> Toxic Substance Control Act	<input checked="" type="checkbox"/> Subrecipient Organizations
<input checked="" type="checkbox"/> Recombinant DNA	<input checked="" type="checkbox"/> Export Controls	<input checked="" type="checkbox"/> Required Cost-Sharing
<input checked="" type="checkbox"/> Biological Agents	<input checked="" type="checkbox"/> New or Modified Space	<input checked="" type="checkbox"/> Requested/Required F&A Waiver
<input type="checkbox"/> Hazardous and Radioactive Materials		
<input type="checkbox"/> Toxic Substance Control Act		
<input type="checkbox"/> Export Controls		
<input type="checkbox"/> New or Modified Space		
<input type="checkbox"/> Requested/Required F&A Waiver		
<input type="checkbox"/> Recombinant DNA and/or Biological Agents		
<input type="checkbox"/> Faculty Buy-out		
<input type="checkbox"/> Sub-recipients		
<input type="checkbox"/> Cost-Sharing		

Save Return to Search

13. Review Certifications and click 'Next'

Proposal Form Step 6/7

1 2 3 4 5 6 7 < Previous **Next >**

### Add Attachments

Attach all supporting documents.

Business Unit: GRANT Proposal Form ID: 16

Proposal Projects Find | View All | First | 1 of 1 | Last

Sequence #:

Requests	Attached File	
1		Add Attachment <input type="button" value="+"/>

14. Review Attachments and click 1

**Proposal Form: Pending** [Request Information](#)  
[Start New Path](#)

Primary PI Approval

**Pending**

[Sharon Comvalius-Goddard](#)

Primary PI Approval

**Proposal Form: Awaiting Further Approvals** [Start New Path](#)

Vice Provost of Research (VPR)

**Not Routed**

[Chiles Thomas](#)

Vice Provost for Res earch

**Proposal Form: Awaiting Further Approvals** [Start New Path](#)

Pre-Award OSP & OSP IT

**Not Routed**

[Susan Hoban](#)

Pre-Award OSP Approval

**Not Routed**

[Daniel Terminello](#)

OSP IT Approval

Comment:

15. Scroll to bottom of page

16. Select  if no changes are necessary. This will forward the PTF to the next approver in the workflow.

17. Select  if changes are necessary. This will send the PTF back to the Originator for modifications. The comment field is available to communicate detailed instructions to the Originator.