

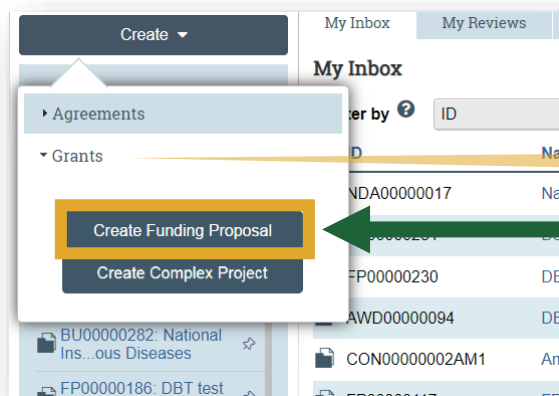


## Create a Funding Proposal

When creating a new Funding Proposal refer to the below for guidance on completing the SmartForms. Once the “Save” button has been selected at any point in the process, a new record with a unique funding proposal number will be generated and OSP will be notified to assign a specialist to the record. Note that a new funding proposal should be entered if it is an application for a given project being submitted to a sponsor for the first time. If it is a follow-on submission (i.e. revision, resubmission, renewal, continuation) please refer to their respective guides.

### STEP 1: Initiate a New Funding Proposal

- After logging into the [RAMP Portal](#), you should see the RAMP Dashboard. Select the **Create** menu and then the **Create Funding Proposal** option under Grants.



Ensure the Grants tab is selected.

- **NOTE:** **Create Funding Proposal** button is also available on the Funding Proposal Tab.
- **IMPORTANT:** At this time, Mason will NOT be using the **Create Complex Project** option.

### STEP 2: General Proposal Information

- Next complete the **General Proposal Information** SmartForm. Refer to some of the tips below to assist with the entry.

You Are Here: @@\_FundingProposal

Creating New: Funding Proposal

General Proposal Information

1. Type of application:  New

a. Is this award being transferred from another institution?

Yes  No

Note the application type will default.



Naming Convention: PI-Sponsor-Due Date  
 Example: Smith-NSF-7/1/22

**Additional Considerations:**

- If the deadline is not firm, type in the word **“Soft”** after the date
- Community Projects must start with **“CommunityProject/”** exactly as it appears within these parentheses.
- If this is a type of pre-proposal/LOI, add **“Pre”** after the due date and tag the record accordingly.

2. \* Short title of proposal: ?

3. \* Long title of proposal: ?

Long titles should be used as the official name of the application that will go to the sponsor

4. \* Program director / Principal investigator / Project lead / Fellow:

Rebecca Simms (pi) ... ✕

This will default to the person who is creating proposal. Click on 3 dots to change if you are creating for someone else.

5. \* Select the direct sponsor: ?

a. If the direct sponsor is not listed, type their name here:

b. If this will be a flow-through, select prime sponsor:

Use % to search for partial words. For example, the full sponsor name for NIH is “National Institutes of Health (NIH).” When typing NIH, the sponsor will not appear. If the user includes “%NIH” all sponsors with “NIH” anywhere in the name will appear.

If direct sponsor or prime sponsor (for flow-through proposals) does not appear, select TBD.

- OSP checks TBD Sponsor report in RAMP
- Local Research Administrator will email OSP Reporting and Systems Administrator a fully completed “Request form for New Agency Creation”
- After review of new agency request, OSP Reporting and Systems Administrator adds new agency into Banner and notifies Funding Proposal creator once completed.
- Funding Proposal creator updates the record by changing the sponsor from TBD to the newly added sponsor

**Important Notes:**

- **If TBD selected, the sponsor type will default to Foundation/Not for Profit.** Once sponsor is added, this can be updated by a Department Reviewer, OSP, or PI/Study Staff (when clarifications were requested).
- If the proposal is a flow through (ie. GMU is a subrecipient of a subcontract from another institution), you will need to identify both the direct sponsor and prime sponsor. Please see example below.
- If direct or prime sponsor is **NASA**, the **[NASA China Restriction Clause Pre-Award Certification Form](#) MUST BE COMPLETED AND SUBMITTED TO OSP PRIOR TO SPONSOR SUBMISSION.**
  - **The review of this form within a proposal package can take up to 7 days due to an additional review step in our standard workflow, which takes place outside of OSP. Therefore, please submit signed certifications with a complete proposal package 7 DAYS prior to Sponsor due date.**

**5. \* Select the direct sponsor: ?**

University of California

**a.** If the direct sponsor is not listed, type their name here:

**b.** If this will be a flow-through, select prime sponsor:

National Institutes of Health

Lead organization and entity with whom GMU will enter agreement with

Prime sponsor

➤ Complete the remaining fields as outlined below

**6. Instrument type:**

- Grant
  - Contract
- [Clear](#)

**7. \* Primary purpose of this project: ?**

- Research
  - Instruction
  - Other Sponsored Activities
  - Intergovernmental Personnel Act (IPA) Award
- [Clear](#)

**8. \* Expected start date: ?**

9/1/2022

**7. \* Primary purpose of this project: ?**

- Research
  - Instruction
  - Other Sponsored Activities
  - Intergovernmental Personnel Act (IPA) Award
- [Clear](#)

**a. \* Type of research: ?**

- Basic
  - Applied
  - Development
  - Other
- [Clear](#)

If Research, please identify the type of research in questions 7.a.

Refer to the sponsor specific solicitation when selecting the expected start date. If you have received direct guidance from a sponsor, include this correspondence in the proposal record.

**9. \* Indirect cost rate type:**

- On Campus
  - Off Campus Remote (>50 miles from campus)
  - Off Campus Adjacent (≤50 miles from campus)
- [Clear](#)

Additional guidance linked [here](#).

**10. Is this a limited submission opportunity?**

- Yes
  - No
- [Clear](#)

Limited submission opportunities are where the Sponsor limits the number of applications from an entity. It is the submitter's responsibility to read the solicitation carefully to determine if it is a limited submission. Do not continue with creating a funding proposal unless approval to submit has been received. To obtain approval for a limited submission opportunity, contact [limited@gmu.edu](mailto:limited@gmu.edu) and attach the solicitation to the email. Once approved, add the approval email under Add Attachments in the funding proposal workspace. If you are not sure if your application is a limited submission, contact [limited@gmu.edu](mailto:limited@gmu.edu).

## STEP 3: Personnel

- On the Personnel SmartForm you will include all personnel involved in the research and identify administrative personnel who have access to edit or view the application.

Once you have filled out the "General Proposal Information" SmartForm, notice that you have been assigned a record number.

1. **Program director / Principal investigator / Project lead / Fellow:**  
 Rebecca Simms (pi)

a. If this is a fellowship, select the mentor:

b. Biosketch:  
 [None]

c. Other support:

2. \* **Responsible department / division / institute:**  
 Anesthesiology

Include the appropriate sponsor specific Biosketch and current and pending report per sponsor's guidelines, when required by sponsor prior to submitting for Department Review

The department will default based on the department established as the PI's employer. This can be updated if needed. Note that if you select a department that does not have reviewers configured, you will receive an error. If the form returns this error when you select your department from the pick list, contact OSP to set up a department reviewer for your department.

- Adding personnel here will allow the user to select the user profile as a department reviewer.

3. **Project personnel:**

a. Add other institutional key, non-key or other significant contributor personnel:

Last Name	First Name	Key
There are no items to display		

b. Add non-institutional key personnel: 

Last Name	First Name	Key
There are no items to display		

### Add Institutional Proposal Staff

1. \* Staff member:

2. \* Project role:

3. \* This individual is considered an investigator for FCOI disclosure purposes:

Yes  No [Clear](#)

← Always indicate Yes for every named

4. Attach a biographical sketch:

[None]

5. Attach current and pending support documentation:

[None]

6. \* This individual is a:

- Senior / key person on the proposal
  - Other significant contributor on the proposal
  - Other personnel
- [Clear](#)

➤ After adding all the personnel, complete the rest of the SmartForm.

Completion Instructions

4. Administrative personnel:

a. Administrative contact: [?](#)  
 Rebecca Simms (pi)

b. Select team members that have edit rights: [?](#)  
  

Last Name	First Name	Employer Name
There are no items to display		

c. Select team members that have read-only rights: [?](#)  
  

Last Name	First Name	Employer Name
There are no items to display		

The administrative contact should be set to the primary person overseeing the Funding Proposal - Either the Department Research Administrator or OSP Specialist.

All OSP personnel have edit rights to all proposals and do not need to be added.

Assign read-only rights to anyone who needs to see the funding proposal (such as Co-PI, unit administrator, post-award administrator, chair, etc.)

## STEP 4: Submission Information

- After saving the previous form and continuing to the next step, you will see the Submission Information SmartForm. Notice that this form view will default based on the sponsor organization type.
- For federal system-to-system submissions, use **Field 4** to locate the application package. **Note that the competition ID can only be used when paired with one of the other search criteria.**

**Submission Information** Go to forms menu Print

- Submission type:**  
Federal
- Direct sponsor:**  
National Institute of Allergy and Infectious Diseases
- \* Will this application be submitted system-to-system?**  
 Yes  No [Clear](#)
- Type a package ID, opportunity ID, or CFDA number, and click Find.**

Package ID:

Opportunity ID (PA or RFA number):

CFDA number:

Competition ID:

Package Id	Opp Id	Opportunity Title	Opening Date	Closing Date	CFDA	Comp ID	Instructions
<input checked="" type="checkbox"/>	PKG00075058	PA-GN-R01	G.g. Training and NIH Ext-UAT FOA (R01-Clinical Trial Not Allowed)	8/13/2021	8/12/2025	93.855	FORMS-G

All non system-to-system proposals will need to be uploaded using the **Add Attachments** activity within the funding proposal workspace

For non grants.gov federal agencies and unsupported grants.gov application packages, select **No** for "Will this application be submitted system-to-system?", and follow process to submit outside of RAMP

Use to replace any currently attached forms with any supported

Package information appears here after using the search function. To select the package you desire, click on the radio button highlighted by the red box.

- If **not** system-to-system select no in question 3. This will expose the below fields.

If the desired opportunity is not listed above, type its ID and title below:

- Package ID:
- Opportunity ID:
- Opportunity title:

If this proposal is not being submitted system-to-system to a federal agency, type the federal identifiers here. In addition, use these fields for pass-through submission types when the prime sponsor is a federal agency.

**5. NIH grant type (if applicable):**

If it is an NIH grant, select the grant type here

**6. Add any general submission documents:**

All PDFs of the solicitations and/or guidelines should be uploaded by using the "Add Attachments" activity within the funding proposal workspace.

**7. Additional Information (e.g. URL to Funding Opportunity):**

Include a URL if applicable and any additional information from the sponsor that might be helpful for reviewers of this proposal.

- When the application is a flow-through, the type direct and prime sponsor information will be auto-populated and optional Fields 4-6 will appear. Field 7 is a required field. Include the FOA URL in Field 7 and attach a copy of the solicitation to your FP.

**Submission Information**

1. **Submission type:** ?  
Pass-through/Subcontract/Subaward

2. **Direct sponsor:** ?  
University of California

3. **Prime sponsor:** ?  
National Institutes of Health

**OPTIONAL**

4. **Direct sponsor contact information:**

5. **CFDA number provided by the direct sponsor:**

6. **Grant award number provided by the direct sponsor:**

7. **Additional Information (e.g. URL to Funding Opportunity):**

Exit Save



- For **non-federal agreements** this form will display with the views below.

The screenshot shows a 'Submission Information' SmartForm. On the left is a navigation menu with items: 'Submission Information' (highlighted), 'Budget Periods and Key Dates', 'Compliance Review', 'Additional Proposal Information', and 'Completion Instructions'. The main content area has four sections:

- 1. Submission type:** Foundation/Not For Profit
- 2. Direct sponsor:** Abbott Laboratories Services Corp
- 3. Add any general submission documents:** Includes an '+ Add' button and a table with columns 'Name' and 'Version'. Below the table, it says 'There are no items to display'.
- 4. Additional Information (e.g. URL to Funding Opportunity):** A text input field.

- For other sponsor types, direct sponsor information will still auto-populate from the General Information SmartForm. Additionally, a field to upload additional sponsor solicitation documents will be available.

## STEP 5: Funding Opportunity Announcement

- This SmartForm will only appear when an application is being submitted system-to-system and has an identified funding opportunity linked. It will show you all the required forms and whether or not they are supported in RAMP.

The screenshot shows the 'Funding Opportunity Announcement' SmartForm. At the top, it states: 'These forms are fully supported and the application will be submitted to Grants.gov'. The form is divided into two sections:

- 1. Required SF424 forms:** A table listing required forms and their support status.
 

Form Name	Supported
SF424 (R & R) V5.0	yes
Project/Performance Site Location(s) V4.0	yes
Research And Related Other Project Information V1.4	yes
Research & Related Senior/Key Person Profile (Expanded) V4.0	yes
PHS 398 Cover Page Supplement V5.0	yes
PHS 398 Research Plan V4.0	yes
PHS Human Subjects and Clinical Trials Information V3.0	yes
- 2. Optional SF424 forms:** A table listing optional forms and their support status.
 

Form Name	Supported
Research & Related Budget V3.0	yes
Research & Related Subaward Budget Attachment(s) Form 5 YR 30 ATT V3.0	yes
PHS 398 Modular Budget V1.2	yes
PHS Assignment Request Form V3.0	yes

- In instances where the required forms within the application package appear supported yet a not supported message appears, please follow the instructions below:
  - Find the OSP Specialist assigned to the FP from the proposal workspace.
  - Select the **"Send Email"** activity from the FP workspace.
  - Request OSP Specialist to download this opportunity within the SF424 Center
  - Once this is complete, user will first need to remove the identified opportunity package identified in **Step 4**, then enter and select the opportunity again for the forms to be updated.



- If user continues to see the error message highlighted below, the proposal will need to be submitted via Grants.gov.

### Funding Opportunity Announcement

Some of the required forms are not supported. Submission would not occur electronically.

**1. Required SF424 forms:**

Form Name	Supported
SF424 (R & R) V5.0	yes
Project/Performance Site Location(s) V4.0	yes
Research And Related Other Project Information V1.4	yes
Research & Related Senior/Key Person Profile (Expanded) V4.0	yes
Research & Related Personal Data V1.2	yes
Research & Related Budget V3.0	yes

**2. Optional SF424 forms:**

Form Name	Supported
Research & Related Subaward Budget Attachment(s) Form V3.0	yes
Disclosure of Lobbying Activities (SF-LLL) V2.0	yes
Grants.gov Lobbying Form V1.1	yes
Attachments V1.2	yes

- You will also find additional details regarding the selected funding opportunity within this **Funding Opportunity Announcement** tab, as well as a link to the guidelines.

**5. CFDA Number:**  
93.855

**6. Opportunity title:**  
G.g. Training and NIH Ext-UAT FOA (R01-Clinical Trial Not Allowed)

**7. Activity Title:**  
Allergy and Infectious Diseases Research

**8. Information URL:**  
Instructions for FOA00000024

## STEP 6: Budget Periods and Key Dates

- A default budget will be generated based on the anticipated start date entered on the first SmartForm. Enter the application deadline and date response expected and make updates to your project type and dates as needed.

### Budget Periods and Key Dates ◀ Go to forms menu Print ▼

- \* Application submission deadline:**
- Date response expected from sponsor:**
- Date project starts:** 9/1/2022
- Date project ends:** 8/31/2027
- Project length (years):** 5
- \* Modular budget?**  Yes  No [Clear](#)

Some sponsors allow submission of modular budgets. If selected, Grants adds any offsets needed to round up to the next module increment in each budget period.
- Add Period**
**Remove Period**
**Update Periods**

**Budget periods:**

Period Number	Name	Duration (Months)	Start Date	End Date
1	Period 1	12	9/1/2022	8/31/2023
2	Period 2	12	9/1/2023	8/31/2024
3	Period 3	12	9/1/2024	8/31/2025
4	Period 4	12	9/1/2025	8/31/2026
5	Period 5	12	9/1/2026	8/31/2027

These will be auto populated based on the start date provided in The General Information SmartForm. These dates can be modified through the Add Period, Remove Period and Update Periods button above the table.

## STEP 7: Compliance Review

- On this SmartForm you will provide regulatory compliance information. Answering this portion of the proposal thoroughly allows GMU central offices to take any necessary follow-up actions to ensure adherence to sponsor and institutional policy.

**Compliance Review**

- \* Human subjects involved in this project:**  
 Yes  No [Clear](#)
- \* Vertebrate animals or Cephalopods involved in this project:**  
 Yes  No [Clear](#)
- \* Recombinant DNA involved in this project:**  
 Yes  No [Clear](#)
- \* Human embryonic stem cells involved in this project:** ⓘ  
 Yes  No [Clear](#)

Previously a part of Workflow routing. These responses do not have to be answered for Proposal initiation, but must be answered prior to Department Review.

**5. Please select the following laboratory hazards:**

- \* Radioactive material:**  
 Yes  No [Clear](#)
- \* Biohazardous material:**  
 Yes  No [Clear](#)
- \* Recombinant or Synthetic Nucleic Acid Molecule or Transgenic Animals:**  
 Yes  No [Clear](#)
- \* Biological toxins:**  
 Yes  No [Clear](#)
- \* Highly acutely toxic chemicals:**  
 Yes  No [Clear](#)
- \* Highly reactive chemicals:**  
 Yes  No [Clear](#)

- Note that when selecting **YES** to many of the fields above, you will be asked to enter additional information. For example, if yes to human subjects, the following questions will appear.

**1. \* Human subjects involved in this project:**

Yes  No [Clear](#)

**a. \* Is this a clinical trial?**  
 Yes  No [Clear](#)

**b. \* IRB review status of this research:** [?](#)

- Approved
  - Pending
  - Exempt
  - Not Yet Submitted
- [Clear](#)

**c.** Type any additional information that might be useful for this review:

If Human Subjects is pending, the system will require the date the protocol was submitted to the IRB. If IRB is approved, the system requires IRB Approval Date, and primary IRB protocol number.

- The next set of questions 8-12, notice additional instructions are provided within some of the responses. An example is provided below. In order to prevent any delays in submitting your proposal, it is important that you follow these instructions carefully.
- The remaining questions in this SmartForm should be answered to the best of your knowledge, may trigger an ancillary review, and include instructions on which parties should be contacted if applicant needs more assistance in determining applicability.

### STEP 8: Additional Proposal Information

- Fill in this SmartForm as completely as possible using the fields provided.

**1. Will there be program income?** [?](#)

Yes  No [Clear](#)

**2. Select resources required for this proposal:**

- Computing: local cluster/national resources
- Storage requirements – small/medium/large storage, secure/sensitive data storage
- Cloud resources
- Renovation, alteration, or unassigned space
- Purchase or installation of major equipment
- Expanded utility services (e.g. fume hoods, air conditioning)

**1. Will there be program income?** [?](#)

Yes  No [Clear](#)

**a. \* If yes, provide program income details:**

[+ Add](#)

Period	Source	Amount
There are no items to display		

**If selected:**

**a. \* Attach one document explaining all resource requirements:**  
 [None] [Upload](#)

### 3. \* Major Goals to be included in Other Support:

◀ Go to forms menu Print ▾ Help

To identify new therapeutic targets for patients with systemic lupus.

The major goals and/or specific aims serve to delineate the project milestones, hypotheses, and the most important overall elements of the project, including all pertinent key words that convey the importance and impact of the project.

### 4. \* Project Scope - Enter three (3) key word rows associated with this proposal:

+ Add

Description

There are no items to display

You must have three individual entries, as all key words may not be combined into a single entry. You may click **+Add** for the first entry and then OK and Add Another for the following two entries. **DO NOT ADD MORE THAN THREE KEY WORDS.** Any Key words after three will not be utilized or searchable.

- Note if you select **yes** to student support, the following fields will be required. You will have the opportunity to provide additional information on the student appointments. This information is for University purposes only and will not auto-populate into the budget.

[Go to forms menu](#)
[Print](#)
[Help](#)

**5. \* Will this proposal include student support?**

Yes
  No
 [Clear](#)

**a. \* Will this proposal include Graduate Students?**

Yes
  No
 [Clear](#)

**\* How many Graduate Students?**

**\* What kind of compensation will each graduate student receive (select all that apply)?**

Graduate student wage  
 GRA - 9-month Stipend  
 GRA - 12-month Stipend  
 GRA - Tuition (minimum of 6 credits per semester, Fall and Spring)  
 GRA - Health Insurance

**b. \* Will this proposal include Undergraduate Students?**

Yes
  No
 [Clear](#)

**\* How many Undergraduate Students?**

**\* Have you contacted OSCAR (the Office of Student Scholarship, Creative Activities, and Research) to help support the project?**

Yes  
 No, but I plan to if awarded  
 No, and have no plans to

[Clear](#)
[Exit](#)
[Save](#)
[Continue](#)

➤ To assist with answering the questions below, please visit our website which provides more information about our [Institutes and Centers](#).

**6. \* Please identify the University Institute(s) with which your proposal is most closely aligned (select all that apply):**

Institute for Biohealth Innovation (IBI)  
 Institute for Digital Innovation (IDIA)  
 Institute for a Sustainable Earth (ISE)  
 Not Applicable

**7. If applicable, select the University Transdisciplinary Research Centers with which this proposal is affiliated:**

Center for Advancement of Human-Machine Partnership (CAHMP)  
 Center for Adaptive Systems of Brain-Body Interactions (CASBBI)  
 Center for Resilient and Sustainable Communities (C-RASC)  
 Quantum Science and Engineering Center (QSEC)  
 Center for Humanities Research (CHR)

**8. Foreign Countries - Enter any foreign countries associated with this proposal (if applicable):**

+ Add

Description
<p>Update Cuba</p>

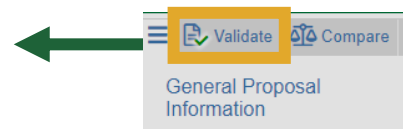
**9. Please select the most appropriate discipline for classification for the annual National Science Foundation (NSF) Higher Education & Research Development (HERD) Survey (Note: Only applicable for projects classified as Research).**

Life Sciences- Agricultural Sciences ...

## STEP 9: Completion Instructions

### Next Steps

1. Click Validate to verify that all required questions in this proposal are complete. Correct any errors or omissions, and refresh the error report.
2. When no errors are reported, click Finish.



The validate button can be found in the left-hand corner of the SmartForm menu.

- After your proposal has been validated, complete the primary and any other budget you add for this project by working with a research administrator from your department/college or assigned OSP personnel.