

Statement of Intent to Collaborate

	Date	
Please identify by full name theDetailed Budget (including FacilitiesBudget Justification	and Administrative Cost Rate and Base)	
Please identify by full name the	and Advance at water a Coat Data and Dasa	
	ification which must include information regarding how the study will comply hat you will provide a single IRB plan prior to initiating any multi-site study. entity that will serve as the IRB of record:	
 The following documents are attached to thi Scope of Work (SOW) Does the SOW include Animals? Does the SOW include Human Subjection 	ects?	
aware of the Prime Sponsor's policies and	ved by the appropriate official of istrative personnel of each institution involved in this grant application are with the submission of this proposal provide the necessary representations establish the necessary inter-institutional agreement consistent with those	
Total Proposed Amount:	Cost Sharing Amt (if applicable):	
Project Title: Prime Sponsor:	Project Period:	
Project Title		
Central Office Email (if applicable):		
Phone: Email:		
Sponsored Programs Contact Name/Title:		
Institutional Reference Number:		
Subrecipient: Principal Investigator:		
Central Office Email (if applicable):		
Liliali.		
Email:	Phone:	
Phone:		
Sponsored Programs Contact Name/Title: Phone:		
Phone:		

NYU is a member of the FDP Expanded Clearinghouse. See profile here.

If yes, provide the link to administrative information commonly requested (DUNS, FedID, audits, etc.); if not, please provide separately.

^{*} Is the Subrecipient a participant in the FDP Expanded Clearinghouse?

^{**}Is Subrecipient's entity profile information available on the institution's website?