

PROPOSAL COVER

SC EPSCoR Solicitation Name and Number Phase-0 Program Solicitation 11-2021	Date Submitted						
Name of Organization of PI		Address of Organization, including Zip Code					
Organization Employer Identification Number (EIN)							
Title of Proposed Project							
Check appropriate box(es) if requesting supplemental funding for student internships (Materials Science Internships only).							
	MCC: Modeling/Computation Core THRUST 1: Optical/Electrochemical/Magnetic Material						
THRUST 2: Polymeric Materials			RUST 3: Interactive Bio				
Requested Amount	Proposed Du (1-12 Months)		Requested Start Date	•			
Check appropriate box(es) if any of the items listed below will be included in SC EPSCoR funding PROPRIETARY AND PRIVILEDGED INFORMATION VERTEBRATE ANIMALS HUMAN SUBJECTS HAZARDOUS MATERIALS INCLUDING REGULATED BIOLOGICAL MATERIALS AND/OR RADIOACTIVE AND/OR OTHER REGULATED CHEMICALS/MATERIALS							
Name	Highest Degree	Degree Year	Phone Number	Email Address			
PI							
CO-PI							
PI Department		PI Mailing Address					

CERTIFICATION PAGE

CERTIFICATION FOR PRINCIPAL INVESTIGATORS: I certify to the best of my knowledge that:

- 1. The statements herein (excluding scientific hypotheses and scientific opinions) are true and complete; and
- 2. The text and graphics herein as well as any accompanying publications or other documents, unless otherwise indicated, are the original work of the signatories or individuals working under their supervision. I agree to accept responsibility for the scientific conduct of the project and to provide the required project reports if an award is made as a result of this proposal. I understand that the willful provision of false information or concealing a material fact in this proposal or any other communication submitted is a criminal offense (U.S. Code, Title 18, Section 1001). I also understand that typing my name in the Signature space constitutes a legal signature.

	Signature	Date
PI		
CO-PI		

CERTIFICATION FOR AUTHORIZED ORGANIZATIONAL REPRESENTATIVE

It is understood that typing your name in the Signature space constitutes a legal signature and that by signing and submitting this proposal, the individual applicant or the authorized official of the applicant organization certifies that:

- The statements made herein are true and complete to the best of their knowledge;
- 2. It agrees to accept the award terms and conditions and should these terms not be met, to negotiate a fair and reasonable plan to reimburse the South Carolina EPSCoR Program for expenditures incurred under the award;
- 3. The organization or its principals are not presently disbarred, suspended, proposed for disbarment, declared in eligible, or voluntarily excluded from covered transactions by any Federal or State department or agency;
- 4. The organization is not delinquent on any Federal or State debt;
- 5. The organization operates as a drug-free workplace;
- 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of1964 (P.L. 88-352, Title IX of the Education Amendments of 1972, as amended (20 U.S.C. § 1681-1683, and1685-1686), Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), the Age Discrimination Act of 1975, as amended (42 U.S.C. § 6101-6107);
- 7. No funds will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of a Member of Congress in connection with the awarding of any Federal contract, grant, loan or cooperative agreement;
- 8. Submission of a complete proposal, including a signed Proposal Cover and Budget Page, signifies the applicant's agreement to release the proposal for external review.

Organization Represe	Date	
Telephone Number	Email Address	FAX Number