Young Investigator Program (YIP) Office of Naval Research FOA Announcement #N00014-19-S-F008

Submission Requirements Checklist

Form #	Items	to be Contained in Form	Notes
	Complete All Fields	See special field instructions, below.	
	Field 3 – Date Received by State	Leave Blank	
	Field 4a – Federal Identifier	Enter "Nooo14"	
SF 424 (R&R) OMB Number: <u>4040-0001</u>	Field 4b – Agency Routing Number	Enter the three (3) digit Program Office Code and the Program Officer's name, last name first, in brackets (e.g., 351 [Doe, John]).	<i>Applicants who fail to provide an Agency Routing Number may receive a notice that their proposal is rejected.</i>
	Field 4c – Previous Grants.gov Tracking ID		Only for changed/corrected applications
	Field 7 – Type of Applicant	Complete as indicated.	If a Minority Serving Institution, select "Other" and specify (MSI).
	Field 9 – Name of Federal Agency	Pre-populated field in Grants.gov.	
	Field 16	Choose "No" Check "Program is not Covered by Executive Order 12372"	
	Field 17 - Certification	Check "I agree"	Attach necessary document in Field 1 8
Project Abstract Form OMB Number: 4040-0010		 Project Summary Abstracts shall contain the following information: 1) Identify the research problem, technical approaches, anticipated outcome of the research, if successful, and impact on DoD capabilities; 2) Identify the Principal Investigator and the University involved in the YIP; 3) Identify the total funds requested from ONR for the performance period. 	Mandatory Form
R&R Form: Other Project Information	Field 1 and 1a – Human Subject Use Fields 2 and 2a – Vertebrae Animal	Complete as indicated. Complete as indicated.	
<u>OMB Number: 4040-0001</u>	Use Fields 4a-4d – Environmental Compliance	Complete as indicated.	Navy instructions/regulations provide for a categorical exclusion for basic and applied

	scientific research usually confined to the laboratory
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R&R Form: Other Project	Field 7 – Project Abstract	Leave Blank	Complete Form SF424, Project Abstract
OMB Number: 4040-0001	Field 8 – Project Narrative	including the objective and approach to be performed, keeping in mind the evaluation criteria. Attach the entire proposal narrative to R&R Other Project Information form in Field 8.	*See solicitation for specific details and requirements.
R&R Form: Research and	 The itemized budget should include the following: Direct Labor Administrative and Clerical Labor Fringe Benefits and Indirect Costs Travel Subaward/Subcontracts 		Submission is required. <u>Budget</u> : Start date for budget purposes should be 01 December. <u>Budget Iustification</u> : Attach as a separate PDF under section K of this form.

Related Budgets OMB Number: 4040- 0001	 Recipient Acquired Equipment or Facilities Other Direct Costs Fee/Profit 	
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Research and Related Senior/Key Person Profile (Expanded) <u>OMB Number: 4040-0001</u>	 Information Requested in Standard Form Attachments must include: A list of all current projects the individual is working on, in addition to any future support the individual has applied to receive, regardless of the source. Title and objectives of the other research projects. The percentage per year to be devoted to the other projects. The total amount of support the individual is receiving in connection to each of the other research projects or will receive if other proposals are awarded. Name and address of the agencies and/or other parties supporting the other research projects. Period of performance for the other research projects. 	Submission is required.
Research and Related Personal Data <u>OMB Number: 4040-0001</u>	Information is provided for the Project Director/Principal Investigator and all other persons identified as Co-Project Director(s)/Co-Principal Investigator(s). Applicants who do not wish to provide some or all the information should check or select the "Do not wish to provide" option.	Submission is required. Provision of the demographic information in the form is voluntary.