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Purpose & Use

The <u>No Cost Extension Request</u> form is used to request a no-cost extension to an award. Awards may be externally-funded or internally-funded.

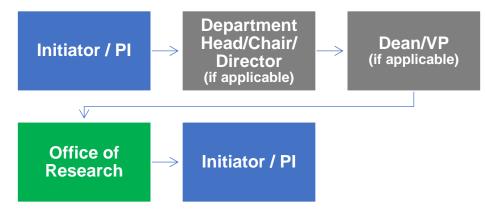
Some sponsors require that requests for extensions be submitted no later than 90 days prior to the expiration date. Check the sponsor and award requirements for requesting an extension to determine whether the request meets contractual guidelines.

Most sponsors require requests or deliverables. Ensure that all of your reports on all awards with the sponsor are current prior to requesting an extension on an award.

Information Needed

- PI contact information
- Award type (external, internal, startup)
- Award name, number, and start/end dates
- Award amount and current budget balance
- Project summary
- Requested end date
- Justifications for request including:
 - o Award progress to date
 - Goals to be accomplished during extension
 - Timeline for completing goals

Form Routing



Statuses

DRAFT

The form opens in **Draft** status and can be edited by the initiator. Once the form is submitted, it will no longer be in **Draft** status.

SAVED

If the initiator edits the form and submits it without any signatures, the form will enter **Saved** status.

The initiator can save progress on No Cost Extension Requests by clicking the **Save for Later** button without signing. SharePoint will automatically email a copy of the **Saved** form to the initiator.

If someone initiates a form on behalf of a PI, the initiator may click the **Save for Later** button to submit without signing it then forward the resulting email to the PI for their signature.

The next time a **Saved** form loads, the form will automatically switch to **Draft** status.

AWAITING CHAIR

If the award is a faculty startup award or if the request includes extending cost share, the PI's supervisors need to approve the request.

In this scenario, once the PI signs and submits the form, the form will enter Awaiting Chair status.

The request will forward to the listed department head/chair/director for approval. The PI will be copied.

If the award is not faculty startup and does not include extending cost share, the form will not enter this status.

AWAITING DEAN

If the award is a faculty startup award or if the request includes extending cost share, the PI's supervisors need to approve the request.

In this scenario, once the department head/chair/director signs and submits the form, the form will enter **Awaiting Dean** status.

The request will forward to the listed dean/vice president for approval. The PI will be copied on the email.

If the award is not faculty startup and does not include extending cost share, the form will not enter this status.

SUBMITTED

If a form is submitted with all required signatures, the form will enter **Submitted** status.

The initiator (and the PI, if different) will receive an email confirming submission of the form. The request will forward to the Office of Research for approval.

REJECTED

If a form is rejected by any party, the form will enter **Rejected** status. The initiator (and the PI, if different) will receive notification of the rejected form via email. The Office of Research email address will be copied.

APPROVED

If a submitted form is approved by the Office of Research, the form will enter **Approved** status. The initiator (and the PI, if different) will receive notification of the approved form via email.

Recipients

- SAVED
 - Initiator
- AWAITING CHAIR
 - Department Head/Chair/Director
 - o Pl
- AWAITING DEAN
 - Dean/Vice President
 - **PI**
- SUBMITTED
 - Initiator
 - PI (if different)
 - Office of Research
- REJECTED
 - \circ Initiator
 - PI (if different)

- APPROVED
 - o Initiator
 - PI (if different)

Email To

If the form needs to be sent to any recipients *other* than those listed above, any user can add any UNO email address into the **Email To** field and then submit the form. The user will be copied on an email sent to the entered email address.

Initiator Instructions by Section

General Instructions

Please note that this form is interactive. Certain sections will appear or disappear depending on the data you enter into the form. Not all instructions below will apply to all requests.

Principal Investigator

| Principal Investigator | | |
|------------------------|----------------|---|
| First Name: | | * |
| Last Name: | | * |
| Email: | | * |
| Employee ID: | | * |
| College: | Select * | , |
| Department: | * | , |
| Phone Number: | | * |
| | Save for Later | |

- 1. First Name: Enter the first name of the PI.
- 2. Last Name: Enter the last name of the PI.
- 3. Email: Enter the UNO email address for the PI.
- 4. Employee ID: Enter the UNO employee ID for the PI (from Workday).
- 5. College: Select the PI's college from the dropdown menu.
- 6. **Department:** Select the PI's department from the dropdown menu.
- 7. Phone Number: Enter a phone number for the PI.
- 8. Save for Later: At any point <u>after</u> steps 1-7, you may click the Save for Later button to save your progress in the form. The form will automatically close, and you may re-open it to continue.

Original Award Information

| Original Award Information | | |
|----------------------------|---------------------|---|
| Award Type: | C Externally-funded | |
| Award Name: | | * |
| Award Number: | | * |
| Start Date: | | * |
| End Date: | | * |
| Total Award Amount: | | * |
| Current Budget Balance: | | * |
| Project Summary: | | |
| | | * |
| | | |
| | | |

- 1. Award Type: Select the award type (externally-funded or UNO-funded).
 - a. If you select **UNO-funded**, indicate whether the award is a new faculty startup award.
- 2. Award Name: Enter the name of the award (obtained in Workday).
- 3. Award Number: Enter the award number (obtained in Workday).
- 4. Start Date: Enter or select the start date for the award.
- 5. End Date: Enter or select the end date for the award.
- 6. Total Award Amount: Enter the total amount for which the award was made.
- 7. Current Budget Balance: Enter the current budget balance amount.
- 8. **Project Summary:** Enter a brief project summary for the award.

Request Information

| Request Information | |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Requested End Date: | * |
| | or your request to extend your grant. Indicate why the project t evidence there is that it will be completed if the extension is ult from an extension. |
| | * |

- 1. Requested End Date: Enter or select the new end date you are requesting for the award.
- 2. Provide a clear and concise reason for that request.

Attachments (Optional)

| Attachments | |
|--------------------------------|-------------------------------|
| Attach any relevant documents. | |
| Description | Attachment |
| | U Click here to attach a file |
| Add another attachment | |

- 1. Add optional attachments: If relevant, click the Add optional attachments link to add the section.
- 2. Description: Enter a description of the file you are uploading.

- 3. Attachment: Attach the relevant document.
- 4. Add another attachment: If relevant, click the Add another attachment link to add more attachment lines.

Award Future

| Award Future | |
|----------------------------------------------------------------|---|
| Briefly summarize the award progress to date: | |
| | * |
| | |
| | |
| | |
| List the goals that will be accomplished during the extension: | |
| | * |
| | |
| | |
| | |
| Provide a timeline for completing these goals: | |
| | * |
| | |
| | |
| | |

- 1. Briefly summarize the award progress to date.
- 2. List the goals that will be accomplished during the extension.
- 3. Provide a timeline for completing the listed goals.

Externally-Funded Awards

Note: This section may not appear based on your funding.

| Externally-Funded Awards | |
|---------------------------------------|---------------------|
| Does this award involve cost-share? | ● Yes ◯ No |
| Do you wish to extend the cost share? | ● Yes ◯ No |
| Check off the source(s) of funding: | Name the source(s): |
| Department/General Fund | * |
| Office of Research | |
| Restricted (Non-Office of Research) | |
| Third Party/Non-UNO | |
| | |

- 1. Indicate whether or not the award involves cost-share.
 - a. If the award does involve cost-share:
 - i. Indicate whether or not you wish to extend the cost share.
 - ii. Check off the source(s) of funding.
 - iii. Name the source(s) of funding.

Internally-Funded Awards

Note: This section may not appear based on your funding.

| Internally-Funded Awards |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Describe how the no cost extension will lead to external funding. Identify specific funding opportunities. |
| * |
| |
| If you received another internal grant award from UNO in the last three years, describe the impact of that award (i.e. publications, presentations, proposals, external funding, or other products). |
| |
| |

- 1. Describe how the no cost extension will lead to external funding, identifying specific funding opportunities.
- 2. Describe the impact of any previous internal grant awards you've received in the last three years.

Startup Awards

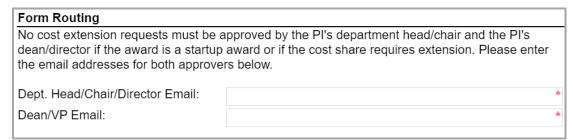
Note: This section may not appear based on your funding.

| Startup Awards | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------|---|
| Most startup packages contain funding from at least the department, the college, and the Office of Research, although there could be additional sources of funding. | | | |
| NOTE: General Fund budgets do not carry forward from one fiscal year to the next. The fiscal year is July 1 to June 30. Contact your chair for extensions to department/college startup, as those funds are not handled by the Office of Research. | | | |
| Original Office of Research Funds: | | | |
| By accepting a startup package, PIs agree to submit grant proposals to external funding agencies. Please list the proposals you submitted to external sponsors below. State whether they were funded, not funded, or remain under review. | | | |
| External Sponsor | Date Submitted | Funding Status | |
| | * | Select | ~ |
| | | Select | ~ |
| | | Select | ~ |
| I have not submitted any proposals to external funding agencies. | | | |

- 1. **Original Office of Research Funds:** Enter the total original amount of funds provided by the Office of Research.
- 2. If you have submitted grant proposals to external funding agencies:
 - a. **External Sponsor:** Enter the name of up to three sponsors to whom you submitted grant proposals.
 - b. **Date Submitted:** Enter or select the date when you submitted your proposal to the listed sponsor.
 - c. **Funding Status:** Select the proposal's funding status from the dropdown menu (funded, not funded, or pending review).
- 3. If you have not submitted any proposals to external funding agencies, click the check box at the bottom. Your startup will not be eligible for an extension.

Form Routing

Note: This section may not appear based upon your funding.



- 1. Dept. Head/Chair/Director Email: Enter the UNO email address for the PI's department head.
- 2. Dean/VP's Email: Enter the UNO email address for the PI's dean or vice president.

Comments (Optional)

| Comments | | |
|---------------------------------|---------------------|--|
| I have entered a test comment i | nto the form. | |
| | | |
| | | |
| Submitted by: jelandr1 | on 12/7/2020 | |
| Add more comments | | |

- 1. Add comments: If relevant, click the Add comments link to add a comment to the form.
- 2. Type your comment in the box that appears. Your username and the date will auto-populate beneath the comment.
- 3. Add more comments: If necessary, click the Add more comments link to add more comments.

Signatures

Review the form, read the certification, and sign the form. Your username and the date will auto-populate.

When the PI's name is entered in the signature field, all of the fields above will lock for processing except for the **Comments** fields.

If relevant, the form will then automatically forward to the PI's supervisors for approval.

Approver Instructions by Action (Supervisors)

No cost extension requests must be approved by the PI's department head/chair/director and dean/vice president if: (1) the award is a **startup** award, or (2) the **cost share** requires extension.

If the cost share does not require extension and the award is not a startup award, supervisors' need not approve.

Comments (Optional)

| Comments | | |
|-------------------------------|---------------------|--|
| I have entered a test comment | into the form. | |
| | | |
| | | |
| Submitted by: jelandr1 | on 12/7/2020 | |
| Add more comments | | |

- 1. Add comments: If relevant, click the Add comments link to add a comment to the form.
- 2. Type your comment in the box that appears. Your username and the date will auto-populate beneath the comment.
- 3. Add more comments: If necessary, click the Add more comments link to add more comments.

Approve Request

| Signatures | | |
|---------------------------------|----------------|----------|
| Principal Investigator: | Test Signature | |
| | jelandr1 | 1/6/2021 |
| Department Head/Chair/Director: | | |
| Dean/VP: | | |
| Office of Research: | | |

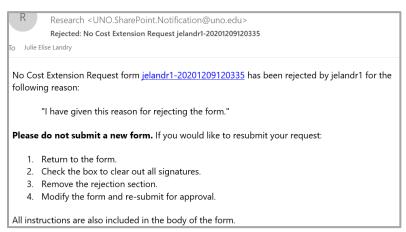
- 1. To approve the No Cost Extension Request, scroll down to the **Signatures** section, reviewing the form as you do.
- 2. **Department Head/Chair/Director:** Enter your name in the appropriate place. Your username and the date will auto-populate.
- 3. **Dean/VP:** Enter your name in the appropriate place. Your username and the date will auto-populate.
- 4. **Submit:** After signing the form, click the **Submit** button in the ribbon at the top.

Reject Request

| Reason for Rejecting: | | * |
|-----------------------|------------------------------------------------------------|---|
| | | |
| 0 inc. | | |
| Sign: | * Click "Submit" in the ribbon above to reject the form | |
| | Click "Submit" in the ribbon above to reject the form. | |

- 1. To reject the No Cost Extension Request, click Reject this form at the top of the form.
- 2. **Reason for Rejecting:** You must enter a reason for the rejection. This language will be provided to the PI (and to the initiator, if different).
- 3. Sign: Sign the form. Your username and the date will auto-populate.
- 4. **Submit:** After signing the form, click the **Submit** button in the ribbon at the top.

5. The PI (and the initiator, if different) will receive an email similar to below. The Office of Research will be copied.



Approver Instructions by Action (Office of Research)

Comments (Optional)

| Comments | | |
|---------------------------------|---------------------|--|
| I have entered a test comment i | nto the form. | |
| | | |
| | | |
| Submitted by: jelandr1 | on 12/7/2020 | |
| Add more comments | | |

- 1. Add comments: If relevant, click the Add comments link to add a comment to the form.
- 2. Type your comment in the box that appears. Your username and the date will auto-populate beneath the comment.
- 3. Add more comments: If necessary, click the Add more comments link to add more comments.

Approve Request

| Signatures | | | |
|---------------------------------|----------------|----------|--|
| Principal Investigator: | Test Signature | | |
| | jelandr1 | 1/6/2021 | |
| Department Head/Chair/Director: | Test Signature | | |
| | jelandr1 | 1/6/2021 | |
| Dean/VP: | Test Signature | | |
| | jelandr1 | 1/6/2021 | |
| Office of Research: | | | |
| | | | |

- 1. To approve the No Cost Extension Request, scroll down to the Signatures section.
- 2. Office of Research: Sign the form. Your username and the date will auto-populate.
- 3. **Submit:** After signing the form, click the **Submit** button in the ribbon at the top.

4. The PI (and the initiator, if different) will be notified via email.

Reject Request

| Reason for Rejecting: | * |
|-----------------------|--------------------------------------------------------|
| | |
| Sign: | * |
| | Click "Submit" in the ribbon above to reject the form. |

- 1. To reject the No Cost Extension Request, click Reject this form at the top of the form.
- 2. **Reason for Rejecting:** You must enter a reason for the rejection. This language will be provided to the PI (and to the initiator, if different).
- 3. Sign: Sign the form. Your username and the date will auto-populate.
- 4. Submit: After signing the form, click the Submit button in the ribbon at the top.
- 5. The PI (and the initiator, if different) will receive an email similar to below. The Office of Research will be copied.

| R | Research <uno.sharepoint.notification@uno.edu></uno.sharepoint.notification@uno.edu> |
|----------|-------------------------------------------------------------------------------------------------------------|
| | Rejected: No Cost Extension Request jelandr1-20201209120335 |
| To Julie | Elise Landry |
| | st Extension Request form j <u>elandr1-20201209120335</u> has been rejected by jelandr1 for the ing reason: |
| | "I have given this reason for rejecting the form." |
| Please | do not submit a new form. If you would like to resubmit your request: |
| 1. | Return to the form. |
| 2. | Check the box to clear out all signatures. |
| 3. | Remove the rejection section. |
| 4. | Modify the form and re-submit for approval. |
| All inst | ructions are also included in the body of the form. |

Contacts

Technical Issues

If you encounter a technical issue with the SharePoint form, contact Julie Landry at jelandr1@uno.edu.

Research Policy/Scenario Questions

If you have a question about your submission or its results, contact the appropriate member of your <u>service</u> team as indicated on the Office of Research website.

Document Notes

Developed by:

Julie Landry, Office Manager Office of Research (504) 280-6836 jelandr1@uno.edu

Created: December 9, 2020

Last updated by:

Julie Landry, Office Manager Office of Research (504) 280-6836 jelandr1@uno.edu

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