

If you are currently submitting an award proposal but cannot proceed without the below-requested sponsor, use the sponsor named "PLACEHOLDER" until the below sponsor is added to the system.

Date of Request: _____

Requestor Name: _____

Requestor Email: _____ Requestor Phone: _____

Before submitting request, check to make sure the sponsor is not in the tenant. If you need to add an address or contact for an existing sponsor, use the Sponsor Change Request Form.

Sponsor Name: _____

Please follow the agreed upon naming conventions:

- Use two letter postal abbreviation for states (LA)
- Use US in front of US federal agencies
- Do not use periods in names
- Leave commas in names
- Standard Abbreviations:
 - Administration = Admin
 - And = &
 - Association = Assoc
 - Corporation = Corp
 - Department = Dept
 - Incorporated = Inc
 - Institute = Inst
 - Limited Liability Company = LLC
 - Louisiana State University = LSU

Sponsor Type, Select One:

- | | |
|--|--|
| <input type="radio"/> Business – Foreign | <input type="radio"/> Non-LA State Government |
| <input type="radio"/> Business – US | <input type="radio"/> Nonprofit Organization – Foreign |
| <input type="radio"/> Foundation – Foreign | <input type="radio"/> Nonprofit Organization – US |
| <input type="radio"/> Foundation – Private | <input type="radio"/> Private University – LA |
| <input type="radio"/> Foundation – University Affiliated | <input type="radio"/> Private University – Non LA |
| <input type="radio"/> Government – Foreign | <input type="radio"/> Public University – LA |
| <input type="radio"/> Internal Non-Ofc Research | <input type="radio"/> Public University – Non LA |
| <input type="radio"/> Internal – Ofc Research | <input type="radio"/> University/College – Foreign |
| <input type="radio"/> LA Local Government | <input type="radio"/> US Federal Government |
| <input type="radio"/> LA State Government | |

Currency:

- Accept all currencies, USD preferred
- Accept ONLY USD

Payment Terms, Select One:

- | | | |
|-------------------------------------|------------------------------|---------------------------------|
| <input type="radio"/> 1% 10, Net 30 | <input type="radio"/> Net 10 | <input type="radio"/> Immediate |
| <input type="radio"/> 2% 10, Net 30 | <input type="radio"/> Net 30 | |

Sponsor Information

Phone Number: _____
Device: Dept Fax Dept Phone Fax Landline Mobile Pager

Phone/Fax Number: _____
Device: Dept Fax Dept Phone Fax Landline Mobile Pager

Primary Address
Address: _____
City: _____ State (Full Name): _____
Zip Code: _____ Country: _____

Alternate Address
Address: _____
City: _____ State (Full Name): _____
Zip Code: _____ Country: _____

Email Address: _____
Website: _____

Contact Information (enter address if different than primary)

Name: _____
Role: _____
Address: _____
City: _____ State (Full Name): _____
Zip Code: _____ Country: _____
Email: _____ Phone Number: _____

Before creating the sponsor, confirm not already in the tenant. Check the legal name of the sponsor being added.

Sponsor ID: SPSR-00000 _____

Entered by: _____ Date: _____