Solicitation Number:	PROPOSAL COVER PAGE								
<ol> <li>SUBMIT TO: Director</li> <li>U.S. Army Research Office</li> <li>ATTN: AMSRL-RO-RI</li> <li>P.O. Box 12211</li> <li>Research Triangle Park, NC 27709-2211</li> </ol>		<ul> <li>2. For consideration by:</li> <li>Biology/Life Sci</li> <li>Chemistry</li> <li>Computer Science</li> <li>Electronics</li> <li>Mechanical</li> <li>Environmental Science</li> <li>Sensors &amp; Electron De</li> </ul>		<ul> <li>☐ Materials</li> <li>☐ Mathematics</li> <li>☐ Physics</li> <li>☐ Comp &amp; Info Sci</li> <li>☐ Wepons &amp; Mtls Sci</li> <li>wepons &amp; Mtls Sci</li> <li>were ☐ Human Rsch &amp; Eng</li> <li>were ☐ Surv/Lethality</li> </ul>		<ul> <li>3. Is this proposal being submitted to another Federal Agency?</li> <li>No Yes If Yes, list the agency:</li> </ul>			
		4. Is applicant delinquent		on) 🗌 No		5. Proposal Valid Until (min of 6 mos):			
6. Entity Identification Number (EIN) or Taxpayer Identification Number (TIN)		7. Data Universal Numbering System (E		stem (DUNS		8. Commercial and Government Entity (CAGE) Code:			
9. Name of organization to which award should be made:			10. Administrative Address of Organization (if different):						
				11. Branch/Campus/Other Component (where work is performed, if different):					
12. Submitting Organization's Contract/Grant Administration Office:				13. Submitting Organization's Audit Office:					
14. Submitting Organization: (Check all that apply)         For Profit:       Large         Small       Disadvantaged         Educational:       HBCU         Minority Institution       Hispanic         Indian Tribal       State         Private       Foreign         Hospital:       Public         Private       Nonprofit         Nonprofit       For Profit         Other (Specify)									
15. Check appropriate box(es) if this proposal includes any of the items listed below:			16. Proposed Amount:					pe of Award Proposed: ngle Investigator	
<ul> <li>Human Subjects</li> <li>Recombinant DNA</li> <li>Vertebrate Animals</li> <li>Genetically Engineered Organisms</li> <li>National Environment Policy Act</li> <li>Limited Rights Data</li> <li>Disclosure of Lobbying Activities</li> <li>Unlimited Rights</li> <li>Historical Places</li> <li>GFE</li> <li>GFD</li> <li>Proprietary Data</li> <li>GFI</li> <li>GFP</li> <li>Ozone Depleting Substances</li> </ul>			<ul><li>17. Proposed Duration (1-60</li><li>18. Proposed Start Date:</li></ul>			ios):	<ul> <li>Young Investigator Program</li> <li>Short Term Innovation Rsch</li> <li>Research Instrumentation</li> <li>Conference/Symposia</li> <li>Other (Specify):</li> </ul>		
20. Title of Proposed Project:									
21. Principal Investigator (PI)/Project Director (PD) Department and							Pl's degree conferred		
							ntific discipline of PI's degree		
	TYPED NAMES TELEPHONE NUM		IBER	FACSIMI	LE NUMBEI	٤	ELECT	RONIC MAIL ADDRESS	
24. PI/PD									
25. CO-PI/PD									
26 a. Primary Administrative representative Authorized to Conduct Negotiations:									
26 b. Alternate Administrative Representative Authorized to Conduct Negotiations:									
27 a. Authorized Representative Signing for Applicant Organization:				27 c. By signing and submitting this proposal, the Offeror is providing the certifications contained in this BAA.					
27 b. Title:	27 b. Title:				ature			Date:	