AWARD PRE-ACTIVATION REQUEST

**Instructions**: Administrative Units should use this form to establish a University of Colorado Denver (UCD) project before the receipt of the sponsored award document for a new or competing continuation award. Complete all requested information, attach a copy of the completed Approval of Application for Grant or Contract form (routing form). Forward to Grants and Contacts (G&C), PreAward Manager, F428, after obtaining Departmental review and approval.

**General Information**
Principal Investigator (PI): __________________ Date: ______

Department: ____________________
Proposal Routing # (found on upper right hand corner of routing form. Contact G&C for assistance if no proposal routing number is found): ____________________

Sponsoring Agency: ____________________

Anticipated award amount: $__________ Anticipated budget period: ____________________

Sponsor Contact: ____________________ Sponsor Phone: ____________________

Provide a project number that will be used to cover any pre-award costs incurred in the event that an award is not made or pre-award are costs not allowable under the terms and conditions of the award: ________.

**PI AND ADMINISTRATIVE UNIT CERTIFICATION**

THIS REQUEST FOR A PRE-ACTIVATED AWARD RELATES TO THE GRANT APPLICATION OR CONTRACT PROPOSAL ALREADY ROUTED AND APPROVED BY G&C.

THE SIGNATURES BELOW GUARANTEE THAT THE DEPARTMENT WILL COVER ANY PRE-AWARD COSTS INCURRED IF THE AWARD IS NOT MADE OR PRE-AWARD COSTS ARE NOT ALLOWABLE UNDER THE TERMS AND CONDITIONS OF THE AWARD AGREEMENT.

IF THIS IS A CLINICAL TRIAL AGREEMENT THAT IS NOT YET EXECUTED, THE PROJECT WILL BE USED SOLELY FOR THE RECORDING OF COMIRB EXPENSE AND DEPOSIT OF SPONSOR REIMBURSEMENT OF THE COMIRB EXPENSE(S) UNTIL THE AGREEMENT IS FULLY-EXECUTED. ANY EXPENSE(S) IN EXCESS OF THE COMIRB FEE(S) THAT ARE CHARGED TO THE PROJECT WILL REMAIN THE RESPONSIBILITY OF THE DEPARTMENT.

Principal Investigator __________________________________ Departmental Administrator/Chair __________________________________

Date __________________________ Date __________________________

GRANTS AND CONTRACTS COMMENTS:
PreAward Administrator: ____________________________ Date: _____________

Pre-Activation Award Amount: $__________ Budget Period: _____________

Distribution: G&C Award File