



GRANTS PROPOSAL ASSURANCE

This form must be submitted and uploaded with each Funding Proposal when it is not possible to submit the electronic Proposal Assurance. This form must be completed by PI, co-PI, key personnel, and fellows/students (fellowships only). Download this form to your computer before completing.

I, _____, as the _____, certify to the best of my knowledge:

- Relative to my role on this proposal, I am responsible for the completeness of the information included in this Princeton ERA record and certify that the information herein is true and accurate. If I am the lead PI, I further certify that I am responsible for this proposal in its entirety.
- I am not debarred, suspended or proposed for debarment or suspension, declared ineligible or otherwise excluded from receiving federal monies by any agency of the United States Government.
- My required annual University Conflict of Interest (COI) disclosure is accurate, complete and updated. I understand I am obligated to report in a timely fashion any changes to such disclosure in accordance with University and sponsor policies. This disclosure includes an accurate, complete and timely representation of any participation I have in a foreign government talent recruitment program (FGTRP), understanding that such participation may make me ineligible to propose or receive federal funding, consistent with Section 10632 of the CHIPS and Science Act, the latest National Science Foundation Proposal and Award Policies and Procedures Guide, or other sponsor guidance. I also understand that I may need to provide copies of my outside foreign agreements to the University and/or federal sponsors in the course of applying for or managing federal funding.
- I have reviewed the proposal and confirm that it includes my required disclosures related to appointments/affiliations (domestic and foreign) as well as current and pending support/other support (domestic and foreign), if and when applicable. I understand I am obligated to report in a timely fashion any changes to such disclosures in accordance with University and sponsor policies.
- I have reviewed and accept the University and sponsor requirements and policies applicable to this project. If an award is made as a result of this application, I accept responsibility for the scientific, administrative and financial activities relative to my project role under this project, and for executing the project in accordance with University and sponsor policies, including submission of required technical/progress reports in a timely and complete fashion.
- I understand that the University must comply with the sponsor's policies and procedures, which may include reporting to the sponsoring agency information relating to an investigation, administrative action or any finding/determination or a violation of the University's or the sponsor's policies relating to discrimination and/or harassment or research misconduct.
- **Any false, fictitious or fraudulent statements or claims may subject me personally to criminal, civil or administrative penalties.**

COMPLIANCE QUESTIONS

Please complete these compliance questions as they apply to this proposal submission. The Funding Proposal Administrative Contact must enter these responses on the Funding Proposal Compliance Review SmartForm page in Princeton ERA prior to proposal submission. See the [Compliance Review Quick Guide](#) for more information.

1. Does this project involve human subjects? Yes No

1a. Is this a clinical trial? Yes No

1b. If this project involves human subjects, has the IRB Protocol been submitted? Yes No

1c. If the IRB protocol has been submitted, complete the following:

<input type="checkbox"/> Pending <input type="checkbox"/> Approved	IRB Protocol #		Approval Date		Expiration Date	
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2. Are live, vertebrate animals used in this project? Yes No

2a. If yes, has the IACUC Protocol been submitted? Yes No

2b. If the IACUC Protocol has been submitted, complete the following:

<input type="checkbox"/> Pending <input type="checkbox"/> Approved	IACUC Protocol #		Approval Date		Expiration Date	
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3. Does this project involve research activities that fall under the oversight of Princeton University's Institutional Biosafety Committee (IBC)? Yes No

3a. If yes, has the IBC Registration been submitted? Yes No

3b. If the IBC Registration has been submitted, complete the following:

<input type="checkbox"/> Pending <input type="checkbox"/> Approved	IBC Registration #		Approval Date		Expiration Date	
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4. Human embryonic stem cells involved in this project. Yes No

4a. If yes, complete the following:

<input type="checkbox"/> Specific stem cell cannot be referenced at this time, one from the registry will be used.	List Embryonic stem cell lines:	
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5. Select if any of the following will be used for this project.

- Chemicals of interest as listed by the Dept of Homeland Security (6 CFR 72)
- Explosive, unstable, reactive materials or processes that could create these materials
- Generation of hazardous gases: highly toxic, pyrophoric, unstable reactive or corrosive
- Particularly hazardous substances: carcinogens, reproductive and developmental toxicants, or acutely toxic materials
- Unbound engineered nanomaterials
- Radiation producing equipment: Ionizing (e.g. x-ray)
- Radiation producing equipment: Non-Ionizing (e.g. microwave/radiofrequency)
- High power magnets or equipment that produces significant ambient magnetic fields (> 30 Gauss)
- Biological materials requiring biosafety level 2 or higher containment conditions
- Invertebrate animals that require containment facilities
- Toxins or biological materials regulated as Select Agents
- None of the above

5a. If any items except "none of the above" are checked, describe the material or equipment being used:

6. Does the project involve access to, use of, or generation of secure or regulated data sets (e.g., HIPAA, CUI, GDPR, etc.) among the project parties? Yes No

6a. If yes, please describe the secure or regulated data set(s), including the controls that apply:

7. Is there a lab or facility space change that would result from this project? Yes No

7a. If yes, please describe the lab or facility space change, including space requirements that are atypical in either nature or size:

8. Does this project require Biosafety Level 3 or 4 (BSL-3 or BSL-4) handling? BSL-3 and BSL-4 means work with agents that may cause serious or potentially lethal disease. Yes No

9. Do you anticipate acquiring any materials, equipment, or information that is controlled under the International Traffic in Arms Regulations (ITAR)? No ITAR controlled items or information may be brought onto Princeton's campus (this includes accessing ITAR controlled information from University networks or computers) without official University approval. Yes No

9a. If yes, description of ITAR controlled items or data, including manufacturer name and model number:

10. During the course of this project, are you collaborating with, receiving funding from, or traveling to any of the countries listed below? Check all that apply.

- Belarus
- Cuba
- Iran
- Iraq
- North Korea
- Russia
- Syria
- Ukraine
- None of the above

11. **Specific to this project**, are you collaborating with or receiving funding from persons or organizations located in any of the countries listed below? If yes, please also ensure this relationship is described in the proposal documentation to be submitted to the sponsor. Check all that apply.

- People's Republic of China (including Hong Kong and Macau)
- Russia
- Saudi Arabia
- None of the above

12. Will any equipment, materials, or supplies be exported (including by hand-carrying) to another country by Princeton University in the course of this project? This includes Fabricated Equipment. Yes No

12a. If yes, Item description including the manufacturer name and model number:

13. During the course of the project, do you anticipate receiving materials, equipment or information subject to the Export Administration Regulations (EAR), excluding those with a classification of EAR99, from the project sponsor or a third party? Yes No

13a. If yes, please describe the export-controlled materials, equipment or information that may be received, including the Export Control Classification Number (ECCN), if known.

14. Do you anticipate working directly with any non-U.S. persons not currently employed by a U.S. institution in the course of this proposed research (e.g. exchanging information, equipment or materials)? Yes No

14a. If yes, please list the name, country and employer for each individual (attach separate sheet if required) and add this information to Question 3b on the Personnel page of the Funding Proposal):

First Name	Last Name	Employer	Country	Email

15. Does this proposal require that additional administrative staff be hired? Yes No

15a. If yes, has the chair or head of the department or unit that will serve as administrative home for the proposal agreed that the hiring and space requirements can be supported? Yes No

15b. Approximate number of administrative staff to be hired: _____

16. Does this proposal require the creation of a new center, institute, or other administrative unit to support or administer it? Yes No

17. Does this proposal require the creation of a new course/set of courses or new credential (minor, certificate, degree)? Yes No

17a. If yes, the addition of courses should be discussed with the head of the department or unit that will host the instructional component. The proposed addition of any credential program must also be discussed with the Office of the Dean of the College and/or the Office of the Dean of the Graduate School, depending on credential type. Have you consulted with the appropriate parties about the feasibility of the curricular elements of your proposal? Yes No

Signature _____

Date _____