



MONTANA

TECHNOLOGICAL UNIVERSITY

Research Agreement Project Information Sheet

The below information is to be completed by the sponsoring agency/organization and submitted with a processed PCF to grants@mtech.edu in order for a Research Agreement to be generated by the Research Office.

Project Sponsor: _____

Project PI(s) and responsibilities: _____

Key Personnel and responsibilities: _____

Project Start Date: _____ Project End Date: _____

Source of Funding: Pass Thru OR Sponsor

If Pass Thru funding, who is the originating sponsor?

Required Attachments:

1. Processed PCF
2. Scope of work
3. Project Timeline and Deliverables
4. Budget and Budget Narrative
5. Prime Agreement or Originating Funding Agreement (if applicable)
6. Sponsor contacts

Signature from sponsoring agency/organization:

Signature

Date

Name: _____

Sponsor Contacts

Institution / Organization

Name:

Address:

Administrative Contact

Name:

Address:

Phone:

Fax:

Email:

Principal Investigator

Name:

Address:

Phone:

Fax:

Email:

Financial Contact

Name:

Address:

Phone:

Fax:

Email:

Authorized Official

Name:

Address:

Phone:

Fax:

Email: