



Intercampus Application Approval Form

Lead Campus: Cornell Ithaca		Weill Co	Weill Cornell Medicine				
Core	Information:						
	Sponsor:						
	Proposal Title:						
	Lead Campus PI:						
	Partner Campus	s PI:					
Partner Campus Proposal Details:							
	Initial/Current	Budget Period Sta	art:	Proposed Project	Proposed Project Start Date:		
	Initial/Current Budget Period End:		nd:	Proposed Projec	Proposed Project End Date:		
	Direct Costs (I	Initial/Current Ye	ar):	Total D	Total Direct Costs:		
	IDC (Initial/Current Year):		ar):	Total IDC:			
		То	tal:		Total:		
	Cost Share Committed? No Yes Cost Share Amount:						
Human subjects or human materials use? No Yes, IRB Approval: Pending Approve							roved
	Vertebrate Animal use? No Yes, IACUC Approval: Pending Approved						
Human embryonic stem cells use? No Yes							
	Institutional Bios	safety Committee	e approval requir	ed? No	Yes		
Partner Campus Required/Attatched Documents:							
	Statement of Work (Required for all proposals			Detailed Budget		Facilities	
	Biosketch			SF 424 Budget		Equipment	
Other Support Document/Current & Pending			Budget Justific	Budget Justification			
	Other Sponsor Required Forms (list below):						
Signature of Partner Campus (OSP/OSRA):							
Name:							
	Title:						
	Signature:		Da	re:			