UNIVERSITY PROPOSAL TO STATE: COVER SHEET

Proposal to: (Name of State of California Agency)				Submittal date:	
State Agency	Name:				
Contact:	Title:				
	State Agency Name:				
	Address:				
	Telephone:				
	Email:				
Project Title:					
Funding Amount:	\$				
Project Period:	Start date:	to	End date	:	
UC Irvine PI:	Name:				
	Title:				
	Department:				
	Address:				
	Telephone:				
	Email:				
Authorized University Official:	Erika Blossom Senior Contract & Grant, Officer Sponsored Projects Administration University of California, Irvine 141 Innovation Dr. Suite 250				
Offiversity Official.					
	Irvine CA, 92697-7600				
	Telephone: (949) 824-2237				
	email: erika.blossom@uci.edu				
Should this proposal be selected for funding, issue contract documents using the Model Language for Contracts with the University of California and California State Universities as directed by the California Department of General Services and available at: http://www.dgs.ca.gov/ols/Resources/ModelContractLanguageUniversities.aspx					
I certify that this proposal is compliant with the State & University Proposal and Administration Manual and that the Principal Investigator has approved the Scope of Work and Proposed Budget Estimate, which are compliant with University Policy.					
Authorized Official Signature					
Name: Erika Blossom	Name: Erika Blossom Date:				
Tite: Senior Contract &Grant Officer					