

## Request for VCR Cost-Share on Grants and Contracts

**PI's Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Dept/Center** \_\_\_\_\_

**Title of Proposal:** \_\_\_\_\_

**Proposal deadline:** \_\_\_\_\_ **Proposed funding period:** \_\_\_\_\_ to \_\_\_\_\_  
mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy

**Funding Agency/Sponsor:** \_\_\_\_\_

- Attach copy of RFP pages stating required match/cost-share.
- Attach copy of proposal budget showing proposed cash and in-kind cost-share.

### **Agreement for cash portion of cost-share:**

|                              | Cost object            | Amount |
|------------------------------|------------------------|--------|
| Department/Center (PI)       | _____                  | _____  |
| College (PI)                 | _____                  | _____  |
| Department/Center (Co-PI)    | _____                  | _____  |
| College (Co-PI)              | _____                  | _____  |
| Vice Chancellor for Research | <u>Budget Transfer</u> | _____  |

### **Signatures:**

|                                     | Name  | Date  |
|-------------------------------------|-------|-------|
| Principal Investigator              | _____ | _____ |
| Department Chair/Center<br>Director | _____ | _____ |
| Dean                                | _____ | _____ |
| Co-PI                               | _____ | _____ |
| Department Chair/Center<br>Director | _____ | _____ |
| Dean                                | _____ | _____ |
| Vice Chancellor for Research        | _____ | _____ |

**Submit form with attachments at least one week before proposal deadline**  
**to:** Office of Research OR email to: [unlresearch@unl.edu](mailto:unlresearch@unl.edu)  
ATTN: Cost-Share Requests  
301 Canfield, UNL 0433