Program Announcement: <b>RFP-21-001</b>		NASA Kentucky			Space Grant Programs Proposal Cover Page				
Closing Date:		5:00 PM ET June 3, 2021		Date Received:		For Office Use Only			
Space Grant Program (GF, TP, etc):		,			NASA Kentucky Proposal #				
Title of Propose Project:									
Proposed Duratio (0-12 Months)		Proposed Start Date:			Total Amount R from NASA Ke		-		
NASA Alignment:		[]ARMD []HEOMD []SMD				[] STMD (Check all that apply)			
Contact Info		PI				Co-l or Student			
Title First Name Last Name:									
Rank:									
Department:									
Organization:									
Address:									
City, State, Zip:									
Phone:									
E-mail:									
Gender (M/F):									
Citizenship:									
Spanish/Hispanic/Latino Ethnicity (Yes/No):									
Race:									
Student Name (G		F and REU Only	9	Student Signature (			GF and REU Only)		
<ul> <li>Certification of Compliance with Applicable Executive Orders and U.S. Code: By signing and submitting the proposal identified in this Cover Sheet/Proposal Summary in response to the NASA Kentucky request for a proposal under the Space Grant Consortium and EPSCoR Programs, the Authorizing Official of the proposing institution, as identified below:</li> <li>1. certifies that the statements made in this proposal are true and complete to the best of his/her knowledge;</li> <li>2. agrees to accept obligations to comply with NASA award terms and conditions if an award is made as a result of this proposal;</li> <li>3. provides certification that the following have been reviewed under 2 CFR Appendix A to 1800: (i) Certification for Debarment, Suspension, and other Responsibility; (ii) Certification Regarding Lobbying; (iii) Assurance for Nondiscrimination Compliance.</li> </ul>									
Name of Organization to which award should b			d be mad	le: Auth	orized Or	ganizatio	anizational Representative: Name, Title		
Address				Phone					
City, State, Zip			E-mail						
PI Signature		Date			Authorized		l Rep. Signature		Date