

Program Announcement: <b>RFP-24-004</b>		<b>NASA Kentucky</b>		<b>EPSCoR RA Pre-Proposal Cover Page</b>	
Closing Date:		NOV 7, 2024		Date Received:	
NASA EPSCoR Program:		RA Pre-Proposal		NASA Kentucky Proposal #	
Title of Proposed Project:					
Proposed Duration: (max 36 months)		Proposed Start Date:		Total Amount Requested from NASA Kentucky:	
Contact Info		PI		Co-I	
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:					
<p><b>Certification of Compliance with Applicable Executive Orders and U.S. Code:</b> 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:</p> <ol style="list-style-type: none"> <li>certifies that the statements made in this proposal are true and complete to the best of his/her knowledge;</li> <li>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>provides certification that Appendix C - Certifications, Assurances, and Representations of the NASA Grants and Cooperative Agreement Manual (GCAM) has been reviewed: (<a href="https://prod.nais.nasa.gov/pub/pub_library/srba/GCAMs.html">https://prod.nais.nasa.gov/pub/pub_library/srba/GCAMs.html</a>).</li> </ol>					
Name of Organization to which award should be made:			Authorized Organizational Representative: Name, Title		
Address				Phone	
City, State, Zip				E-mail	
PI Signature		Date		Authorized Rep. Signature	