



# WEST LIBERTY UNIVERSITY

Grants Office  
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## Grant Proposal Transmittal Form

Granting Agency: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_

Purpose of Grant (include a copy of the Request for Proposal or similar documentation):

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Grant Amount: \$ \_\_\_\_\_

Required Match: Yes \_\_\_ No \_\_\_

Grant Submission Deadline: \_\_\_\_\_

To be submitted to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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### Required Signatures:

Provost/Cabinet Member \_\_\_\_\_  
Signature Date

Grants Manager \_\_\_\_\_  
Signature Date

Vice President of Fiscal Affairs \_\_\_\_\_  
Signature Date

**\*\*This form, the proposal (including the budget), RFP, and any other related documents must be submitted to the Grants Manager a minimum of five working days prior to the deadline for submission. \*\***