

# PHS 398 Checklist

OMB Number: 0925-0001

## 1. Application Type:

From SF 424 (R&R) Cover Page. The responses provided on the R&R cover page are repeated here for your reference, as you answer the questions that are specific to the PHS398.

\* Type of Application:

New  Resubmission  Renewal  Continuation  Revision

Federal Identifier:

## 2. Change of Investigator / Change of Institution Questions

Change of principal investigator / program director

Name of former principal investigator / program director:

Prefix:

\* First Name:

Middle Name:

\* Last Name:

Suffix:

Change of Grantee Institution

\* Name of former institution:

## 3. Inventions and Patents (For renewal applications only)

\* Inventions and Patents: Yes  No

If the answer is "Yes" then please answer the following:

\* Previously Reported: Yes  No

#### 4. \* Program Income

Is program income anticipated during the periods for which the grant support is requested?

Yes  No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period	*Anticipated Amount (\$)	*Source(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### 5. Assurances/Certifications (see instructions)

In agreeing to the assurances/certification section 18 on the SF424 (R&R) form, the authorized organizational representative agrees to comply with the policies, assurances and/or certifications listed in the agency's application guide, when applicable. Descriptions of individual assurances/certifications are provided at: <http://grants.nih.gov/grants/funding/424>

*If unable to certify compliance*, where applicable, provide an explanation and attach below.

Explanation:

#### 6. \* Disclosure Permission Statement

If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)?

Yes  No