

OTHER SUPPORT – RPPR TEMPLATE

PI Last Name, First Name

ACTIVE [[DO NOT INCLUDE gifts, prizes, donors, equipment grants, training grants, or discretionary funds]]

Domestic Active Grant Support

Full Grant Number (PI last name)	Project Period	Effort Calendar Months
Agency	<i>Annual: Total Cost</i>	<i>Entire Period: Total Cost</i>
Title		
Project Goals/Aims		
Role: Co-Investigator		

Full Grant Number (PI last name) (THIS AWARD)*	Project Period	Effort Calendar Months
Agency	<i>Annual: Total Cost</i>	<i>Entire Period: Total Cost</i>
Title		
Project Goals/Aims		
Role: Co-Investigator		

*[[DO INCLUDE the award for which the progress report is being submitted and include the effort that will be devoted in the next reporting period.]]

Foreign Active Grant Support

Full Grant Number (PI last name)	Project Period	Effort Calendar Months
Agency	<i>Annual: Total Cost</i>	<i>Entire Period: Total Cost</i>
Title		
Project Goals/Aims		
Role: Role on Project (not for us)		

OTHER AGREEMENTS, RESOURCES, AND SIGNIFICANT COLLABORATIONS [[DO NOT INCLUDE gifts, prizes, donors, equipment grants, training grants, or discretionary funds]]

Domestic

Agreement Type [[Sponsored Research Agreement, MTA, DTUA]]
Collaborator Name (s)
Collaborating Institution
Project Title
Execution Date Period of performance Effort Calendar Months (if applicable)
Funds if applicable (Total costs)
Award/Grant number (Funding Agency) if applicable.

Foreign

Agreement Type [[Sponsored Research Agreement, MTA, DTUA]]
Collaborator Name (s)
Collaborating Institution
Project Title
Execution Date Period of performance Effort Calendar Months (if applicable)
Funds if applicable (Total costs)
Award/Grant number (Funding Agency) if applicable.

OVERLAP

None

[[Note for Overlap: Include a brief description of the project; and a statement addressing overlap. If overlap exists, please provide details on adjustments and plans to eliminate any overlapping support if this application is funded. Moreover, the total level of effort for each investigator may not exceed 12 person months with the addition of effort proposed in the application being considered. If effort exceeds 12 person months, please include a detailed description of adjustments to be made in the event this application is funded. If there is no overlap, state: "There is no scientific or budgetary overlap" beneath each source of other support.]]

INACTIVE

Domestic Active Grant Support

Full Grant Number (PI last name)	Project Period	Effort Calendar Months
Agency	<i>Annual:</i> Total Cost	<i>Entire Period:</i> Total Cost
Title		
Project Goals/Aims		
Role: Co-Investigator		

Foreign Active Grant Support

Full Grant Number (PI last name)	Project Period	Effort Calendar Months
Agency	<i>Annual:</i> Total Cost	<i>Entire Period:</i> Total Cost
Title		
Project Goals/Aims		
Role: Role on Project (not for us)		

[[Additional note for Other Support provided under a consortium/contractual arrangement or that is part of a multi-project award: Indicate the project number, PD/PI, and source for the overall project, and provide all other information for the subproject only.]]

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