

INTERNAL FORMS

COLLEGE OF AGRICULTURE AND ENVIRONMENTAL SCIENCES AGRICULTURAL RESEARCH PROGRAM

AG-01 (Collaboration with Cooperative Extension and Others)

AG-02 (Intent to Use A&T Farm Land, Facilities, Livestock, Personnel)

AG-03 (Involvement of Human Subjects)

AG-04 (Intent to Use Laboratory and Equipment)

AG-05 (Personnel Requirements)

AG-06 (Communications Items)

AG-07 (Appropriateness of Budget to Objectives/Available Funds)
(to be completed by ARP accountant)

Purpose and Directions:

The purpose of the attached forms is to allow for a systematic review of various aspects of your proposal to the Evans-Allen program. These forms must be completed and submitted to the Agricultural Research Program office before final evaluation of your proposal can be completed. These forms are internal to the Agricultural Research Program.

Once the project and the forms are reviewed and approved, any changes in the plans as described must be approved in writing through the Agricultural Research Office.

INTERNAL REVIEW FORM AG-01
**Collaboration with Cooperative Extension and Others*

TITLE OF PROPOSAL: _____

PRINCIPAL INVESTIGATOR: _____

DATE: _____

Directions: Answer all questions and obtain appropriate signatures.

1. Do you plan to collaborate with persons from Cooperative Extension on our campus?
 YES
 NO

2. If yes, describe the nature of your collaboration with the Cooperative Extension personnel. (see description of type of collaboration below)

3. If no, explain why not.

4. Do you plan to collaborate with persons from Cooperative Extension from other campuses?
 YES
 NO

5. If yes to question 4, describe the nature of your collaboration with the Cooperative Extension personnel from other campuses.

6. Do you plan to collaborate with persons across department, CAES, University or Industry/Agencies?

YES

NO

7. If yes to question 6, describe the nature of your collaboration with persons across department, CAES, University or Industry/Agencies, describe the extent of collaboration

****Collaboration can vary in type and degree:***

Networking: General discussion of topic, confirming that topic is driven by need of audiences

Partnering: Jointly producing a product or event such as a bulletin, workshop, etc.

Cooperating: Sharing resources and results, working together.

Collaboration: Working cooperatively on an activity where both parties share responsibility and credit for the outcome.

Signature of PI: _____

Signature of Collaborators: _____

(or attach letter documenting their involvement)

Signature of Extension Administrator: _____

(if collaborating with N.C. A & T's Cooperative Extension)

INTERNAL REVIEW FORM AG-02

Intent to Use A&T Farm Land, Facilities, Livestock, Personnel

Principle Investigator

First name Last name
.....

Department
.....

Email Phone
.....

Project Information

Project Title:.....

Please indicate the CAES facility/ies you are requesting /or planning to use?

Crop Land Animal Unit Green Houses Do not plan to use the farm

If the project uses any facilities, answer the question for each checked item.

Is this a renewal project? Yes No

Is this a multi-year project? Yes No

If 'Yes', please indicate number of years:.....

Project start date Project end date
____/____/____ ____/____/____

Will this project need to build any farm structure? Yes No

If "Yes", what type of structure?

.....
.....

Have you secured funds to build the structures? Yes No

Will the facility/ies need electricity, water, heat or cooling? Yes No

1. If using Crop Land

What plant/crop are you planning to plant?

.....

Do you have plans of using any genetically modified crops? Yes No

If "Yes", identify the genetically modified crop and its status of legal approval, including any state, federal, etc. approvals.

.....

If "Yes", do you have an adequate containment and management plan?

.....

Please indicate the plot size you are looking for and the preferred location (see farm map for field#)

.....

Will you be using pesticides or fertilizers? Yes No

If "Yes", list each pesticide, herbicide and fertilizer to be used and indicate frequency of use:

.....

.....

Do you need irrigation? Yes No

If "Yes", please indicate the type of irrigation system, you are requesting.

.....
.....

Do you need farm personnel? Yes No

If "Yes", please indicate the services and duration, you are seeking from N.C. A&T farm personnel.

.....
.....

Do you need any farm equipment? Yes No

If "Yes", please indicate the farm equipment/s, you are requesting.

.....
.....

2. If using Farm Animals/Livestocks

Which animals are you planning to use?

.....

Have you submitted an application to the N.C. A&T IACUC for protocol approval on the use of these animals?

Has your IACUC application been approved? Yes No

Are you planning to purchase new farm animals? Yes No

If "Yes", which animals and how many? Please also indicate source of funding.

.....
.....

Do you need a space to house them? Yes No

Do you plan a specific animal feeding or watering regimen? Yes No

If "Yes", please specify

.....

.....
What will happen to the livestock after the project is over?

.....
Do you need farm personnel? Yes No

If "Yes", please indicate the services, you are seeking from N.C. A&T farm personnel, and the duration.

.....
Do you need any farm equipment? Yes No

Are you planning to use one of the research units? Yes No

If "Yes", how you will the unit be used?

.....
3. If using Greenhouse

Are you planting new plants? Yes No

How much area will you need?

Do you need farm personnel? Yes No

If "Yes", please indicate the services, you are seeking from N.C. A&T farm personnel, and duration.

.....
Do you need any farm equipment/s? Yes No

If "Yes", please indicate the farm equipment/s, you are requesting.

.....
Do you need irrigation? Yes No

If "Yes", please indicate the type of irrigation system, you are requesting.

.....

Required Signature

Principal Investigator

Name

Signature..... Date.....

Farm Manager

Name- Leon Moses

Signature..... Date.....

Associate Dean for Research

Name- Dr. Shirley Hymon-Parker

Signature..... Date.....

INTERNAL REVIEW FORM AG-03

Involvement of Human Subjects and Involvement of Animals

TITLE OF PROPOSAL: _____

PRINCIPAL INVESTIGATOR: _____

DATE: _____

Directions: Answer all questions and obtain appropriate signatures.

1. Does the proposal involve the use of human subjects?
 YES (if yes, answer questions below)
 NO
2. Have you obtained the Human Subjects Certification through the test on the Division of Research website?
 YES (*attach copy of test completion certificate*)
 NO (must obtain before submitting proposal)**

If no, why not? _____

3. Does the proposal involve the use of animals?
 YES (if yes, answer questions below)
 NO
4. Have you obtained IACUC Approval for the proposed research?
 YES (*attach copy of approval*)
 NO (must obtain before submitting proposal)**

If no, why not? _____

Signature of PI:

N.C.A&T is committed to compliance with the National Institutes of Health, "***Principles for the Care and Use of Laboratory Animals,***" "The Guide for the Care and Use of Laboratory Animals," the "Guide for the Care and Use of Agriculture Animals in Agriculture Research and Teaching," the provisions of the Animal Welfare Act, and the Good Laboratories Practice Act.

The university established an Institutional Animal Care and Use Committee (IACUC) to review activities involving the use of vertebrate animals for research, teaching, production, demonstration, or other use. Procedures of this committee and related forms can be found at:

<https://old.ncat.edu/research/dored/procedures.html>

**Human Subjects Certification must be completed prior to submission of proposal. <https://old.ncat.edu/research/dored/index.html>

INTERNAL REVIEW FORM AG-04
Intent to Use Laboratory and Equipment

TITLE OF PROPOSAL: _____

PRINCIPAL INVESTIGATOR: _____

DATE: _____

Directions: Answer all questions and obtain appropriate signatures.

1. Does this project require the use of a laboratory? YES NO
2. If yes, where is the laboratory located? _____
3. Does the laboratory require any type of renovations? YES NO
4. If yes, give a brief explanation and an estimated cost. _____

5. Is this cost included in your proposal's budget? YES NO
6. Does the laboratory require additional equipment? YES NO
7. If yes, what type of equipment is needed? _____
8. Can this equipment be used for future research? YES NO
9. What is the estimated cost for additional equipment? _____
10. Is this cost included in the proposal's budget? YES NO

Signature of PI: _____

INTERNAL REVIEW FORM AG-05
Personnel Requirements

TITLE OF PROPOSAL: _____

PRINCIPAL INVESTIGATOR: _____

DATE: _____

Directions: Answer all questions and obtain appropriate signatures.

1. List the persons who will be involved in this research. Give name (if known), position title and percentage of time to be spent on project.

- a. EHRA

- b. SHRA

- c. Graduate Research Assistants

- d. Undergraduate Students

2. Will this project require the hiring of additional personnel? _____

3. If yes, give position title and a brief job description.

4. Is this cost included in your proposal's budget? _____

Signature of PI: _____

Internal Form AG-06 *Communications Products Included in Proposal*

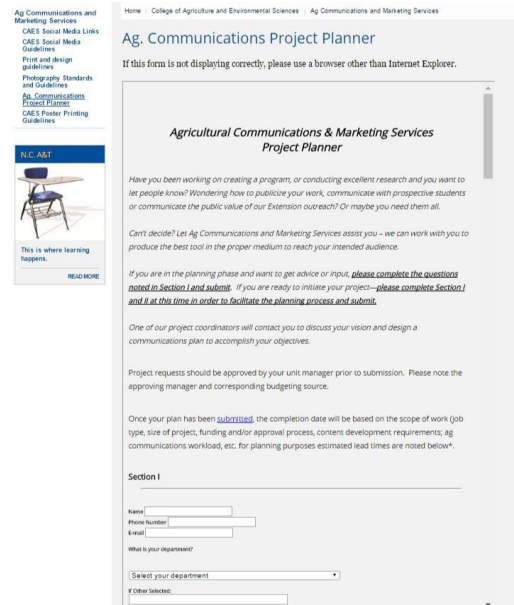
The Agricultural Communications team is dedicated to providing research faculty with professional media – graphic design, photography, videography, writing and editing, web development, and more – that will accomplish your desired communications goal.

Please fill out a communications check-up form if your proposed project will include any print or electronic communication media as part of its deliverables, including such things as video, curriculum, fact sheets, brochures, new web content, photography, etc.

This Ag Communications Project Planner Form is therefore provided as a means to assist faculty in requesting communications materials or publicity for their programs and projects. The development of effective communication materials – whether curriculum, video, web presence, press release, brochure, pamphlet or poster – involves collaboration between the subject matter experts (faculty) and communications experts in the Agricultural Communications and Marketing Services team. The form enables researchers to be proactive in determining what, if any, communication tools may be required before, during and at the conclusion of the proposed research endeavor.

Once a communications project is initiated, the form is also referred to and used to update and track progress. The form may be accessed online at:

http://dev-agcom.ag.ncat.edu/new_comm_planner/



The screenshot shows the online form titled "Ag. Communications Project Planner". The page header includes navigation links for Home, College of Agriculture and Environmental Sciences, and Ag Communications and Marketing Services. The form contains several paragraphs of introductory text, including a note about browser compatibility and a request for user information. The form fields include:

- Name:
- Phone Number:
- E-mail:
- What is your department? (Dropdown menu)
- Other Selected:

INTERNAL REVIEW FORM AG-07

Appropriateness of Budget to Objectives and Available Funds

(TO BE COMPLETED BY ARP BUDGET MANAGER)

TITLE OF PROPOSAL: _____

PRINCIPAL INVESTIGATOR: _____

DATE: _____

Directions: Answer all questions and obtain appropriate signatures.

1. What is the total cost of the budget? _____
2. What is the amount of the proposal being replaced? _____
This is related to discontinuing projects within the department.
3. Are the costs in line with funding from Evans-Allen? _____
4. Are there unknown costs not discussed in the narrative?
5. Is the budget in proper form?
6. What revisions are necessary?
7. What is the average project cost for the department? _____

Signature of Budget Manager: _____
(Adonica Williams)