

Project Number \_\_\_\_\_

**Project Cover Sheet  
California Sea Grant College Program  
New Proposal**

TO: Russell A. Moll, Director  
California Sea Grant College Program  
University of California  
9500 Gilman Drive Dept. 0232  
La Jolla, California 92093-0232

Project Title: \_\_\_\_\_  
\_\_\_\_\_

Project Leader Name: _____	Co-Project Leader Name: _____
Department: _____	Department: _____
Institution: _____	Institution: _____
Address: _____	Address: _____
City & Zip: _____	City & Zip: _____
Telephone: _____	Telephone: _____
Fax: _____	Fax: _____
E-mail: _____	E-mail: _____
% of Time: _____	% of Time: _____

**Financial Summary:**

	Proposed Year 1 of _____	Proposed Total all Years
Extramural Project Funds: (Do not include trainee stipend costs)	\$ _____	\$ _____
Matching Funds:	\$ _____	\$ _____
Number of Trainees Requested:	_____	_____
Estimated Start/Completion Date:	_____	_____

**Approvals**

Project Leader	_____	Date _____
Co-Project Leader	_____	Date _____
Department Head	_____	Date _____
Campus (Contract & Grant office)	_____	Date _____

Will animal subjects be used?      yes      no

DATE APPROVED \_\_\_\_\_ PROTOCOL # \_\_\_\_\_ PENDING \_\_\_\_\_

Does this application involve any recombinant DNA technology or research?      yes      no

