

UNIVERSITY PROPOSAL TO STATE: COVER SHEET

Proposal to: (State of California Agency Name)			
State Agency Contact:	Name:		
	Address:		
	Telephone:		
	Email:		
Project Title:			
Funding Amount:	\$		
Project Period:	Start date:	to	End date:
UC Berkeley PI:	Name:		
	Department:		
	Address:		
	Telephone:		
	Email:		
Authorized University Official:	Name:		
	Contract and Grant Officer, Sponsored Projects Office		
	University of California, Berkeley		
	2150 Shattuck Avenue, Suite #300		
	Berkeley, CA 94704-5940		
	Telephone: (510) 642-0120		
	Email: spoawards@berkeley.edu		
<p><i>I certify that this proposal is compliant with the State & University Proposal and Administration Manual and that the Principal Investigator has approved the Scope of Work and Proposed Budget Estimate, which are compliant with University Policy.</i></p>			
Authorized Official Signature			
Name:		Date:	
Contract and Grant Officer, Sponsored Projects Office			
University of California, Berkeley			