



VCU

TO: Grants and Contracts Accounting

FROM:

DATE:

SUBJECT: **ADVANCE BANNER INDEX NUMBER REQUEST**

I have received an unofficial notification from the sponsoring agency listed below that my grant/contract application has been accepted.

Please assign a Banner Index number for the pending grant/contract. Pending the receipt of the executed award notice by OSP, my department will guarantee any expenditure charged against the assigned Banner Index number. The Non-sponsored program Banner number guaranteed to accept charges should the grant not be awarded is _____. (Guaranteed index may be a 2, 4, or 6 ledger index.)

This alternative Banner Index number will be used only if the University does not receive an award notice within 60 days from the sponsor. **This form must be returned to gcavcu@vcu.edu.** My department will be responsible to communicate with OSP to minimize delays beyond 60 days.

The following details are provided as required for the grant index create. I understand that additional documentation may be required to minimize inaccurate coding errors during the Advance Index setup.

*=Required

*InfoEd PT/PD/SC# or RAMS-SPOT # _____

*Principal Investigator's Name: _____ V# _____

*School and Department: _____

*Title of Project: _____

*Prime Federal Agency Name (if appl.): _____

*Sponsor's Name: _____

Sponsor's Banner ID Number: _____

*Budget Period: _____

*Program Type listed on IAF or RAMS-SPOT (e.g. Research, Training etc.): _____

*CFDA #, if available: _____

*Research location (on or off campus): _____

Project Period: _____

Amount of Award: _____

*F&A Rate: _____ FACR Code: _____

*Source of funds (check one): Federal _____ Fed. Flow Thru _____ State _____
Local Gov't _____ Industry _____ Foundation _____

Anticipated Instrument Type (e.g. Contract, Grant, Clinical Trial, etc.): _____

*Fiscal Administrator Name: _____ FA# _____

*Predecessor Org Number (5 character Banner code): _____

*Cost Sharing: Yes _____ No _____
If Yes please indicate whether: Voluntary _____
Mandatory _____

*Required attachments to include with this filled out form:
_____ A copy of the funding mechanism or announcement

*Approvals:

*Principal Investigator

*Department Chair/School Dean

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**The above pending proposal/award data has been verified in InfoEd or RAMS-SPOT for accuracy by:*

_____ (Accountant Name).

**(Check one):*

_____ *The information agrees/disagrees (circle) with the IAF in InfoEd/RAMS-SPOT; or*

_____ *The PT# shown does not have any associated documents in InfoEd/RAMS-SPOT, and was thus created based on additional documentation provided by the department.*