

# Preparing Forms for Your ATE Proposal: Cover Sheet

This instruction sheet is derived directly from the Preparing Forms for Your NSF ATE Proposal webinar, presented on April 2, 2025. The full webinar is available for viewing at: <https://tinyurl.com/MCFormsWebinar>  
A comprehensive version of the Quick Reference Guide can be accessed at: <https://tinyurl.com/MCFormsGuide>

## Cover Sheet

Start preparing your proposal by clicking on the Cover Sheet hot link on the control page. It provides NSF with administrative details and data that are required for a proposal and with the certifications that all statements in the proposal are true and that the college is following the appropriate federal grant regulations.

**Project Start Date and Duration.** The most frequently requested ATE project start dates are June 1, July 1, and September 1. Your business office may prefer a July 1 start date so that the grant budget year aligns with the fiscal year at the college. However, if your project involves faculty who are not on contract in the summer, you may want to choose September 1 so that you have personnel on board at the start of the project. (Note that requesting an early start date won't speed up the funding process! Your preferred start date will have no impact on when your grant award is made.)

The proposed duration of an ATE project can be either two or three years. Mentor-Connect strongly recommends requesting 3 years (36 months) for maximum flexibility. If you conclude your work in less than 36 months, you can close out the grant early.

**Proposal - 8377**

- Manage Personnel and Subaward Organizations
- Required
- Cover Sheet**
- Project Summary
- Project Description
- References Cited
- Budget(s)
- Budget Justification(s)
- Facilities, Equipment and Other Resources
- Senior Personnel Documents
- Data Management Plan
- Project Data Form
- Postdoctoral Mentoring Plan

**Cover Sheet** [Give Feedback >](#)

**\* Required**

**Cover Sheet (PAPPG)**

**Requested Start Date and Proposal Duration**

The requested start date is important to NSF staff, however, requests for specific start dates may not be met. The duration should be consistent with the nature and complexity of the proposed activity.

**Requested Start Date** (mm/dd/yyyy) **\* Proposed Duration**

**Prime Organization**

| Prime Organization  | Time Zone                   | Unique Entity Identifier (UEI) |
|---|-----------------------------|--------------------------------|
| FLORENCE-DARLINGTON TECHNICAL COLLEGE (INC)<br>2715 W LUCAS ST<br>FLORENCE, SC 29501-1242 | America/New_York (GMT-5:00) | RU92GVPJNNV1                   |
| Employer or Taxpayer Identification Number  | 570-42-1007                 |                                |

**Primary Place of Performance**

Please edit this information if the work will primarily be performed at a location that is different from the Prime Organization.

**\* Organization Name**  
Florence-Darlington Technical College

**\* Country**  
United States

**\* Street Address**  
2715 W LUCAS ST

**Street Address (Line 2)**

**Department Name**

**\* City**  
FLORENCE

**\* State/Territory**  
SC - South Carolina

**\* Postal Code**  
29501-1242

ZIP Code+4 Lookup (USPS)

**General Information.** The next section of the cover sheet asks for information about the place where your project will be performed. In most cases, this will be your college.

**Other Information.** In this section, the question under Human Subjects regarding Institutional Review Board (IRB) approval applies to all ATE grant applicants. (The other questions will not be relevant to most prospective ATE grantees, with the possible exception of potential impacts on tribal nations.) Indicate that the IRB review is pending unless your proposal was reviewed by an IRB that issued a determination letter prior to proposal submission. *Note that an IRB determination letter will be required before NSF can award a grant. Be sure to submit your proposal for IRB review while it is being considered for funding.*

**Other Information**

Check appropriate box(es) if this proposal includes any of the items listed below. Some selections may require additional information.

- ☐ Beginning Investigator (Biological Sciences Directorate proposals only) [PAPPG II.E.2](#)
- ☐ Disclosure of Lobbying Activities [About Disclosure of Lobbying Activities](#) [PAPPG II.D.1.d](#)
- ☐ Proprietary or Privileged Information [About Proprietary or Privileged Information](#) [PAPPG II.E.1](#) & [II.D.1.c](#)
- ☐ Special Exception to the Deadline Date Policy [About Natural or Anthropogenic Events](#) [PAPPG I.F.2](#)
- ☐ Historic Places [PAPPG II.D.2.vii](#) & [XI.J](#)
- ☐ Live Vertebrate Animals [PAPPG II.E.4](#)
- ☒ Human Subjects [PAPPG II.E.5](#)
  - \* Has the human subjects research for the project been approved by an Institutional Review Board (IRB)?
    - ☐ Approved
    - ☒ Pending
    - ☐ Exempt
- ☐ Funding of an International Branch Campus of a U.S. IHE [PAPPG I.E.1](#)
- ☐ Funding of a Foreign Organization or Foreign Individual [PAPPG I.E.2.c](#)
- ☐ International Activities [PAPPG II.E.8](#)
- ☐ Potential Life Sciences Dual Use Research of Concern [Details](#) [PAPPG II.E.6](#) & [XI.B.5](#)
- ☐ Off-Campus or Off-Site Research [PAPPG II.D.1.d \(viii\)](#) & [II.E.9](#)
- ☐ Potential Impacts on Tribal Nations [About Potential Impacts on Tribal Nations](#) [PAPPG II.E.10](#)

IRB requirements and the language about IRBs can be confusing. It takes one level of IRB review to be completed by the IRB chair to determine if your proposal is “exempt,” which means your proposal is exempt from further review. Should a proposal not be considered “exempt” at the first level of review, then all members of the IRB must review the proposal and other guidelines may apply. ATE proposals are almost always deemed “exempt.”

Eight categories of research qualify for exemption from coverage by the regulations for protection of human research subjects. (Keep in mind that all NSF grant-funded work is considered research.) ATE projects typically fall in the exempt category based on Basic Health and Human Services (HHS) Policy for Protections of Human Research Subjects, Subpart A, subsection 46.104(1) which covers educational settings or subsection 46.104(2) which deals with educational tests, survey procedures, observation of behavior, etc. Review by the IRB chair will determine if your proposal falls into at least one of the 8 categories. If so, your proposal will be declared exempt from further IRB review. The IRB Chair can then issue the determination letter.

Mentor-Connect recommends setting up an IRB at your college instead of relying on another institution to provide IRB review of your proposal. Since establishing an institutional policy and procedure is required to establish an IRB, your college needs to do this well in advance of the time your proposal will be considered for an award. See the Mentor-Connect resource library for guidance on how to establish an IRB; how to train those who will serve on this board; sample templates for submitting your proposal to the IRB for review; and a sample determination letter that is required from that review.

If your ATE project may involve the resources or interests of a federally recognized American Indian or Alaskan Tribal Nation, you *must* check the box entitled “Potential Impacts on Tribal Nations.” This includes planning to reference a Tribal Nation in materials, public forums or publications. You do not need to submit written confirmation of the Tribal Nation’s approval with your ATE proposal. However, you must enclose with your proposal a copy of any written request for approval that was submitted to the Tribal Nation. If your proposal is recommended for funding, you must submit documentation of the Tribal Nation’s approval before NSF will make an award decision.

**Auto-Check.** When you have completed your Cover Sheet, the auto-check system will alert you about any errors or missing information. If the Cover Sheet is complete, you will see a message saying that it has been saved.

|   |
|---|
| <p>❗ The form contains the following error(s) which must be fixed before submitting the proposal.</p> <ul style="list-style-type: none"> <li>Proposed Duration cannot be zero or blank</li> </ul> |
| <p>⚠ Your form contains the following warning(s):</p> <ul style="list-style-type: none"> <li>A Requested Start Date has not been entered</li> </ul>   |
| <p>✅ The cover sheet has been successfully saved.</p>   |

This is what the first page of the Cover Sheet will look like when it is generated by Research.gov. (Your unique proposal number will be generated by the system.)

| COVER SHEET FOR PROPOSAL TO THE NATIONAL SCIENCE FOUNDATION  |   |  |   |   |  |
|--|---|--|---|---|--|
| PROGRAM ANNOUNCEMENT/SOLICITATION NO./DUE DATE<br><b>NSF 21-598 10/05/2023</b>   |   | <input type="checkbox"/> Special Exception to Deadline Date Policy   |   | FOR NSF USE ONLY<br><b>NSF PROPOSAL NUMBER</b><br><b>2348707</b>  |  |
| FOR CONSIDERATION BY NSF ORGANIZATION UNIT(S) (Indicate the most specific unit known, i.e. program, division, etc.)<br><b>DUE - ATE-Projects</b>   |   |  |   |   |  |
| DATE RECEIVED<br><b>09/25/2023</b>   | NUMBER OF COPIES<br><b>1</b>                        | DIVISION ASSIGNED<br><b>11040000 DUE</b>   | FUND CODE<br><b>7412</b>  | UEI (Unique Entity Identifier)<br><b>F6GULVFKKQA6</b>   | FILE LOCATION                          |
| EMPLOYER IDENTIFICATION NUMBER (EIN) OR TAXPAYER IDENTIFICATION NUMBER (TIN)<br><b>560937578</b>   |   | SHOW PREVIOUS AWARD NO. IF THIS IS<br><input type="checkbox"/> A RENEWAL<br><input type="checkbox"/> AN ACCOMPLISHMENT-BASED RENEWAL |   | IS THIS PROPOSAL BEING SUBMITTED TO ANOTHER FEDERAL AGENCY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF YES, LIST ACRONYM(S) |  |
| NAME OF ORGANIZATION TO WHICH AWARD SHOULD BE MADE<br><b>[REDACTED]</b>  |   |  | ADDRESS OF Awardee ORGANIZATION, INCLUDING 9 DIGIT ZIP CODE<br><b>245 COLLEGE RD<br/>SMITHFIELD, NC 27577-6055 US</b>               |   |  |
| AWARDEE ORGANIZATION CODE (IF KNOWN)   |   |  |   |   |  |
| NAME OF PRIMARY PLACE OF PERF<br><b>Johnston Community College</b>   |   |  | ADDRESS OF PRIMARY PLACE OF PERF, INCLUDING 9 DIGIT ZIP CODE<br><b>245 COLLEGE RD, PO Box 2350<br/>SMITHFIELD, NC 27577-6055 US</b> |   |  |
| IS AWARDEE ORGANIZATION (Check All That Apply)<br><input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> MINORITY BUSINESS <input type="checkbox"/> IF THIS IS A PRELIMINARY PROPOSAL THEN CHECK HERE<br><input type="checkbox"/> FOR-PROFIT ORGANIZATION <input type="checkbox"/> WOMAN-OWNED BUSINESS  |   |  |   |   |  |
| TITLE OF PROPOSED PROJECT<br><b>Implementing a Simulated Cyber Range Training Environment to Prepare Cyber Technicians</b>   |   |  |   |   | SHOW LETTER OF INTENT ID IF APPLICABLE |
| REQUESTED AMOUNT<br>\$ <b>645,836</b>  | PROPOSED DURATION (1-60 MONTHS)<br><b>36</b> months | REQUESTED STARTING DATE<br><b>07/01/2024</b>   |   | SHOW RELATED PRELIMINARY PROPOSAL NO. IF APPLICABLE   |  |
| THIS PROPOSAL INCLUDES ANY OF THE ITEMS LISTED BELOW   |   |  |   |   |  |
| <input checked="" type="checkbox"/> TYPE OF PROPOSAL <b>Research</b><br><input checked="" type="checkbox"/> COLLABORATIVE STATUS <b>Non-Collaborative</b><br><input type="checkbox"/> BEGINNING INVESTIGATOR<br><input type="checkbox"/> DISCLOSURE OF LOBBYING ACTIVITIES<br><input type="checkbox"/> PROPRIETARY & PRIVILEGED INFORMATION<br><input type="checkbox"/> HISTORIC PLACES<br><input type="checkbox"/> LIVE VERTEBRATE ANIMALS IACUC App. Date _____<br>PHS Animal Welfare Assurance Number _____ |   |  |   |   |  |
| <input type="checkbox"/> HUMAN SUBJECTS Exemption Subsection _____ or IRB App. Date _____<br><input type="checkbox"/> FUNDING OF INT'L BRANCH CAMPUS OF U.S. IHE<br><input type="checkbox"/> FUNDING OF FOREIGN ORGANIZATION OR FOREIGN INDIVIDUAL<br><input type="checkbox"/> INTERNATIONAL ACTIVITIES: COUNTRY/COUNTRIES INVOLVED _____<br><input type="checkbox"/> POTENTIAL LIFE SCIENCES DUAL USE RESEARCH OF CONCERN<br><input type="checkbox"/> OFF-CAMPUS OR OFF-SITE RESEARCH                         |   |  |   |   |  |
| PI/ID DEPARTMENT<br><b>Business Education and Technology</b>   |   | PI/ID POSTAL ADDRESS<br><b>245 College Road<br/>PO Box 2350<br/>Smithfield, NC 27577<br/>US</b>                                      |   |   |  |
| PI/ID FAX NUMBER   |   |  |   |   |  |
| NAMES( TYPED)  | High Degree   | Yr of Degree   | Telephone Number  | Email Address   |  |
| PI/ID NAME<br><b>[REDACTED]</b>  | <b>EdD</b>  | <b>2016</b>  | <b>[REDACTED] 2197</b>  | <b>[REDACTED] du</b>  |  |
| CO-PI/ID<br><b>[REDACTED]</b>  | <b>BS</b>   | <b>1992</b>  | <b>[REDACTED] 2204</b>  | <b>[REDACTED]</b>   |  |
| CO-PI/ID   |   |  |   |   |  |
| CO-PI/ID   |   |  |   |   |  |
| CO-PI/ID   |   |  |   |   |  |



The second page shows the required college certifications. Note that the Authorized Organizational Representative (AOR) is the only individual who may submit and sign this certification page.

| <b>CERTIFICATION PAGE</b>   |  |                              |  |
|---|--|------------------------------|--|
| <p><b>Certification for Authorized Organizational Representative(or Equivalent)</b><br/>           By electronically signing and submitting this proposal, the Authorized Organizational Representative(AOR) is:(1)certifying that statements made here in are true and complete to the best of the individual's knowledge; and(2)agreeing to accept the obligation to comply with NSF award terms and conditions if an award is made as a result of this proposal. Further, the proposer is hereby providing certifications regarding conflict of interest, flood hazard insurance, responsible and ethical conduct of research, organizational support,and safe and inclusive working environments for off-campus or off-site research, as set forth in the NSF Proposal &amp; Award Policies &amp; Procedures Guide(PAPPG).Willful provision of false information in this application and its supporting documents or in reports required under an ensuing award is a criminal offense(U.S.Code,Title 18,Section §1001).</p> <p><b>Certification Regarding Conflict of Interest</b><br/>           The AOR is required to complete certifications stating that the organization has implemented and is enforcing a written policy on conflicts of interest (COI), consistent with the provisions of PAPPG Chapter IX.A; and that, to the best of the individual's knowledge, all financial disclosures required by the conflict of interest policy were made; and that conflicts of interest, if any, were, or prior to the organization's expenditure of any funds under the award, will be, satisfactorily managed, reduced or eliminated in accordance with the organization's conflict of interest policy. Conflicts that cannot be satisfactorily managed, reduced or eliminated and research that proceeds without the imposition of conditions or restrictions when a conflict of interest exists, must be disclosed to NSF via use of the Notifications and Requests module with Research.gov</p> <p><b>Certification Regarding Flood Hazard Insurance</b><br/>           Two sections of the National Flood Insurance Act of 1968 (42 USC §4012a and §4106) bar Federal agencies from giving financial assistance for acquisition or construction purposes in any area identified by the Federal Emergency Management Agency (FEMA) as having special flood hazards unless the:<br/>           (1) community in which that area is located participates in the national flood insurance program; and<br/>           (2) building (and any related equipment) is covered by adequate flood insurance.</p> <p>By electronically signing the Certification Pages, the Authorized Organizational Representative (or equivalent) located in FEMA-designated special flood hazard areas is certifying that adequate flood insurance has been or will be obtained in the following situations:<br/>           (1) for NSF awards for the construction of a building or facility, regardless of the dollar amount of the award; and<br/>           (2) for other NSF awards when more than \$25,000 has been budgeted in the proposal for repair, alteration or improvement (construction) of a building or facility.</p> <p><b>Certification Regarding Responsible and Ethical Conduct of Research (RECR)</b><br/> <b>(This Certification applies to proposals submitted prior to July 31, 2023, and is not applicable to proposals for conferences, symposia, and workshops.)</b><br/>           By electronically signing the Certification Pages, the Authorized Organizational Representative is certifying that, in accordance with the NSF Proposal &amp; Award Policies &amp; Procedures Guide, Chapter IX.B., the institution has a plan in place to provide appropriate training and oversight in the responsible and ethical conduct of research to undergraduates, graduate students and postdoctoral researchers who will be supported by NSF to conduct research. The AOR shall require that the language of this certification be included in any award documents for all subawards at all tiers.</p> <p><b>Certification Regarding Responsible and Ethical Conduct of Research (RECR)</b><br/> <b>(This Certification applies to proposals submitted on or after July 31, 2023, and is not applicable to proposals for conferences, symposia, and workshops.)</b><br/>           By electronically signing the Certification Pages, the Authorized Organizational Representative is certifying that, in accordance with the NSF Proposal &amp; Award Policies and Procedures Guide, Chapter IX.B., the institution has a plan in place to provide appropriate training and oversight in the responsible and ethical conduct of research to undergraduate students, graduate students, postdoctoral researchers, faculty, and other senior personnel who will be supported by NSF to conduct research. As required by Section 7009 of the America Creating Opportunities to Meaningfully Promote Excellence in Technology, Education, and Science (COMPETES) Act (42 USC 1862o – 1), as amended, the training addresses mentor training and mentorship. The AOR shall require that the language of this certification be included in any award documents for all subawards at all tiers.</p> <p><b>Certification Regarding Organizational Support</b><br/>           By electronically signing the Certification Pages, the Authorized Organizational Representative (or equivalent) is certifying that there is organizational support for the proposal as required by Section 526 of the America COMPETES Reauthorization Act of 2010. This support extends to the portion of the proposal developed to satisfy the Broader Impacts Review Criterion as well as the Intellectual Merit Review Criterion, and any additional review criteria specified in the solicitation. Organizational support will be made available, as described in the proposal, in order to address the broader impacts and intellectual merit activities to be undertaken.</p> <p><b>Certification Regarding Dual Use Research of Concern</b><br/>           By electronically signing the certification pages, the Authorized Organizational Representative is certifying that the organization will be or is in compliance with all aspects of the United States Government Policy for Institutional Oversight of Life Sciences Dual Use Research of Concern.</p> <p><b>Certification Requirement Specified in the William M.(Mac)Thornberry National Defense Authorization Act for Fiscal Year 2021, Section 223(a)(1) (42 USC 6805(a)(1))</b><br/>           By electronically signing the Certification Pages, the Authorized Organizational Representative is certifying that each individual employed by the organization and identified on the proposal as senior personnel has been made aware of the certification requirements identified in the William M.( Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021, Section 223(a)(1) (42 USC 6805(a)(1)).</p> <p><b>Certification Regarding Safe and Inclusive Working Environments for Off-Campus or Off-Site Research</b><br/> <b>(This certification applies only to proposals in which data/information/samples are being collected off-campus or off-site, such as fieldwork and research activities on vessels and aircraft.)</b><br/>           By electronically signing the Certification Pages, the Authorized Organizational Representative is certifying that, in accordance with the NSF Proposal &amp; Award Policies and Procedures Guide, Chapter II.E.9, the organization has a plan in place for this proposal regarding safe and inclusive working environments.</p> |  |                              |  |
| AUTHORIZED ORGANIZATIONAL REPRESENTATIVE  |  | SIGNATURE                    |  |
| NAME<br><div style="background-color: black; height: 1.2em; width: 100%;"></div>  |  | Electronic Signature         |  |
| TELEPHONE NUMBER<br><div style="background-color: black; height: 1.2em; width: 100%;"></div>  |  | DATE<br>Sep 25 2023 09:36 AM |  |
| EMAIL ADDRESS<br><div style="background-color: black; height: 1.2em; width: 100%;"></div>   |  | FAX NUMBER                   |  |