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...building R&D capabilities

OKLAHOMA APPLIED RESEARCH SUPPORT (OARS)

First FY10

R&D Faculty and Student Intern Supplement Awards

Intent Form Deadline:

5:00 p.m., Wednesday, August 5, 2009

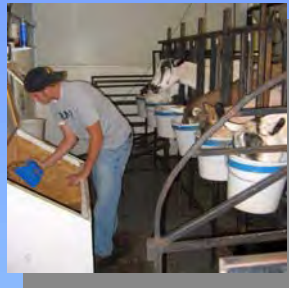
(An Intent form must be filed by the above deadline to be eligible to apply.)

Application Deadline:

5:00 p.m., Wednesday, August 19, 2009

Target Contract Start Date:

January 1, 2010



Oklahoma Center for the Advancement
of Science and Technology
Programs Division
755 Research Parkway, Suite 110
Oklahoma City, OK 73104-3612

Phone: (405) 524-1357
Toll Free: 866-265-2215
Web site: www.ocast.ok.gov

Information Page

Eligibility: Holders of an active OARS R&D Faculty and Student Intern Partnerships contract who have not received a Supplement Award for that contract.

Amendments: This Solicitation may be amended by OCAST. Amendments can be found on OCAST's web site under the section "Program Support/Solicitation/R&D Intern Partnership Solicitation Amendments." It is the responsibility of the applicant to review any such amendments and make necessary changes in the application to meet the amended Solicitation requirements.

On-line solicitation and forms: This solicitation with forms is available at: <http://www.ocast.ok.gov>, on the OCAST web site under the section "Program Support/Solicitation/R&D Intern Partnership Solicitation."

Proposal preparation workshops: Since space is limited, potential participants need to register at the OCAST web site, <http://www.ocast.ok.gov>, at least two days prior to the workshop. The location of the workshop will be e-mailed to registrants prior to the workshop.

| Application Preparation Workshops | | 1:30 - 4:30 PM |
|-----------------------------------|-------------------------|----------------|
| Date | Location | |
| July 16, 2009 | Lawton, Oklahoma | |
| July 21, 2009 | Stillwater, Oklahoma | |
| July 23, 2009 | Oklahoma City, Oklahoma | |
| July 28, 2009 | Norman, Oklahoma | |
| July 30, 2009 | Tulsa, Oklahoma | |

OCAST CONTACT INFORMATION: (405) 524-1357

| | | |
|---|----------------|--|
| Michelle McFarland, Programs Officer IV | (405) 319-8408 | mmcfarland@ocast.state.ok.us |
| Brad Sutherlin, Programs Officer III | (405) 319-8413 | bsutherlin@ocast.state.ok.us |
| Brittany Johnson, Programs Officer I | (405) 319-8411 | bjohnson@ocast.state.ok.us |
| Dan Luton, Programs Director | (405) 319-8415 | dluton@ocast.state.ok.us |

OKLAHOMA APPLIED RESEARCH SUPPORT (OARS)
FUNDING COMPETITION PROPOSAL SOLICITATION
FY10.1 OARS R&D FACULTY AND STUDENT INTERN
SUPPLEMENTS

OKLAHOMA CENTER FOR THE ADVANCEMENT OF SCIENCE AND TECHNOLOGY (OCAST)

PROGRAM PURPOSE

The OCAST OARS R&D Faculty and Student Intern Supplement program supports the enhancement of active OARS R&D Faculty and Student Intern Partnerships programs to serve additional interns and to benefit more Oklahoma firms.

The supplement program enhances a current project and may include additional intern venues with a minimum of \$2500 up to \$20,000 of additional OCAST funding. The ending date for the supplement may be up to 12 months after the end of the current award contract year.

No-Cost Modifications. Changes that do not require an increase in OCAST funding are managed via the OARS Contract Modification form. This form is available on the web site or from the R&D Contracts Administrator. Such changes would include, but are not limited to: no-cost time extensions, changes in mentors or P.I., the addition/deletion of an intern venue, or a change in match source. These changes must be submitted at least 60 days prior to the requested effective date of the change. In general, these requests require an Interim Progress Report or a required Annual Report and selected items from this solicitation related to the change. Major changes may require additional information.

APPLICANT ELIGIBILITY

Organizations and Principal Investigators eligible for the OARS Faculty and Student R&D Intern Supplement program awards shall be those that have an active OARS R&D Faculty and Student Intern Partnership contract at the time of Supplement application who have not received a Supplement award for that contract.

Any PI, who has a **delinquent progress report** or has not responded to other OCAST requests for information, impact survey data, or special reports on a previously funded OCAST project, will not be eligible to submit an application for new project funding. Any PI, who has a delinquent progress report at the time of review, will not be eligible for review. Any PI with a delinquent progress report at the time of award will not receive a contract until the progress report has been submitted. In the latter case, if the delinquent report has not been submitted within sixty (60) days of the award date, OCAST will nullify the award.

PERFORMANCE EVALUATION

Acceptance of an OARS contract obligates the P.I. to submit progress reports that are sent to Reviewers, the majority of whom reside outside Oklahoma, who evaluate project performance. A satisfactory performance evaluation shall be required for the continuation of a project. The issuing of a Supplement contract does not change the reporting deadlines and requirements of the original contract.

A Final Report for the Supplement Award is due no later than thirty (30) days after the end of the Supplement Award. Unsatisfactory performance on a Supplement Award could result in termination of an entire OARS R&D Faculty and Student Intern Partnerships award.

SUBMISSION REQUIREMENTS

Intent Form Submission

After the Intent submission deadline a project tracking number will be e-mailed to the PI's that submit an intent form by the deadline. The project tracking number must be placed in the upper right corner of all copies of all forms submitted with the proposal. Only those who have submitted an intent form by the deadline are eligible to submit an application.

Statement of Intent may be faxed to (405) 319-8426 to meet the deadline; the original intent, with signatures, should be mailed to the address below. It is however, the responsibility of the PI to ensure that the intent is received by OCAST by the deadline.

The Statement of Intent must be received by OCAST by 5:00 P.M., August 5, 2009.

Intent forms that are not faxed, and have been logged into a commercial delivery service with a "delivery guaranteed" before 5:00 P.M. on August 5, 2009 will be accepted if the applicant can provide acceptable documentation that the Intent form was provided to the delivery service with delivery to the address listed below guaranteed prior to the closing date and time.

Intent Submission Address:

Intern Partnerships Supplement Program

Programs Division

OCAST

755 Research Parkway, Suite 110

Oklahoma City, OK 73104-3612

Note: The information with respect to title, applicant organization, and funds requested may be different on the proposal; however, at least one of the persons listed must be the PI or co-PI on the proposal.

Application Submittal

The application must be received by OCAST no later than 5:00 P.M., August 19, 2009.

Applications that have been logged into a commercial delivery service with a "delivery guaranteed" before 5:00 P.M., August 19, 2009, will be accepted if the applicant can provide acceptable documentation that the proposal was provided to the delivery service with delivery to the address listed below guaranteed prior to the closing date and time. **Applications will not be accepted via facsimile, electronic mail, or in any electronic format.**

Applications must be delivered to the following address:

Application Submission Address:

Intern Partnerships Supplement Program

Programs Division

OCAST

755 Research Parkway, Suite 110

Oklahoma City, OK 73104-3612

OCAST will verify receipt of your proposal if you attach a self-addressed, stamped postcard to the original.

Required Materials. Each Supplement application shall include the following materials organized as specified below:

| Number of Sets | Contents |
|----------------|--|
| 1 | Paper original application with appendices attached (stapled or fastened with a binder clip in the upper left corner and marked ORIGINAL in the upper right corner). |
| 1 | Paper set of the Application Pages 1-10 (This corresponds to Items 1-19). Set must be stapled in the upper left corner. |
| 1 CD | File containing the entire application in (.pdf) format including appendices |

IMPORTANT NOTE: Each application must include one signed paper original of the entire proposal and one set of Application Pages 1-10 (Items 1-19). A CD containing an electronic copy of the entire proposal as a single file using the Adobe Acrobat (.pdf) must be submitted. This file must be named APS10.1-XXX-iXX and P.I.'s First and Last name.pdf, where XXX-iXX is the Project Number received from OCAST upon submission of the Statement of Intent Forms(s) (e.g., AR10.1-082-i01 Michelle McFarland). For identification purposes, the CD must be marked by a permanent marker or printed label using the above example.

DO NOT USE binders or notebooks, rubber bands or regular paper clips. OCAST recommends colored sheets to set-off individual sections of the proposal as the reviewers find such proposals more accessible. Do not use tabs to delineate sections.

A. Interim Report

Submissions must include an Interim Annual report in the style of the required Annual Report as described in Item 27 of the proposal. It is important to share with the reviewers the successes of your current program.

B. Format

Requests for a Supplement of up to 12 months with an increase in funding require, in general, a proposal as complete as was presented for the original program.

When the overall R&D project and the partnering organizations are unchanged an abbreviated Supplement application is permitted. If applicable, the use of the abbreviated format is encouraged.

To request additional funding of from \$2500 to \$20,000 to include additional intern experiences at the same venue(s) as in the current program include Items 1- 21; Item 22 if a new P.I. or co-P.I. is being added; Item 23 if a mentor is being added; Item 24 if a faculty intern is being added; replace Items 25-26 by a three to five page description of the benefits to the program by serving additional interns; Item 27, The Interim Report.

Potential applicants may suggest additional abbreviated application formats for future competitions.

Review process

The reviewers first evaluate the Interim Report (Item 27.) to determine the achievements and quality of the current program. Only when the current program is evaluated as “Satisfactory” will the reviewers continue the evaluation process using the criteria for the current regular competition.

CONTRACT RELATED INFORMATION

Supplemental awards will be issued a separate contract from the original OARS R&D Faculty and Student Intern Partnerships contract and all conditions and rules applying to that award are retained for the Supplement award. Funds awarded may not be spent prior to the Supplement award contract date.

Oklahoma statute requires that the mechanism for funding OARS projects be a professional services contract between OCAST and the applicant organization(s). The Contractor is the applicant organization(s) which: (1) employs or is affiliated with the PI or co-investigators, (2) provides research services and/or facilities for the funded project and (3) executes the contract. If more than one applicant organization is involved, the fiscal agent organization receives and accounts for all funds. The contract shall include commitments on the part of the Contractor(s) to perform the activities described in the application and funded by OCAST. However, the obligations of each party to a contract shall be limited to that portion of the contract they have committed to perform.

Any applicant organization or principal investigator who, in OCAST's judgment, has failed to correct a material breach of contract previously awarded under any of OCAST programs will not be eligible to be awarded a new funding contract.

If a PI under an OARS contract becomes unable to perform the proposed research, the applicant organization must inform OCAST within 10 days. The Contractor shall inform OCAST within 10 days of the occurrence of any of the following:

1. the official notification of resignation by the PI as an employee of one of the parties to the contract;
2. the official decision to terminate the PI as an employee of one of the parties to the contract;
3. the inability of the PI to perform the research described in the application;
4. any occurrence which the Contractor or Fiscal Agent determines will affect the successful completion of the research project;
5. the PI leaves Oklahoma;
6. the majority of the research is not performed in Oklahoma; and
7. the Receipt of notification of award of concurrent funding by the PI or co-investigator, which is not part of the approved matching monies requirement, to support any portion(s) of the research, which is supported by OCAST funds.

Any of the conditions in Items 1-7 above may result in the termination of the contract at the discretion of OCAST. If the PI is subsequently employed by another eligible applicant organization in the State of Oklahoma that agrees to support the research project, OCAST may consider issuing a new contract negotiated between OCAST and the new organization. If a PI cannot perform on a contract, the applicant organization may request that OCAST consider continuing the contract with a new PI.

The Contractor shall be responsible for the following:

1. Assuring and documenting compliance with State and Federal requirements pertaining to human subjects, vertebrate animals, recombinant DNA, radioactive substances, narcotics and dangerous drugs, and/or biological hazards, which require special approval or license, before issuing a subcontract for any portion of the project funded by OCAST.
2. Maintaining records and accounts that properly document and account for the source and application of all project funds. All such records and accounts shall be made available on demand by OCAST for inspection and use in carrying out its responsibilities for administration of the funds.
3. Providing specified documentation of matching expenditures to OCAST with each Request for Payment. At no time shall the amount invoiced from OCAST exceed the amount of documented matching funds expended. Failure to document the required matching amount could result in a decrease in the OCAST funding amount and/or a termination of all-subsequent OCAST funding.

4. Complying with the audit policy of OCAST and, as OCAST deems necessary, permitting authorized representatives of OCAST and the State of Oklahoma full access, and the right to fully examine, all project records and accounts. The Contractor, or designated fiscal agent, shall provide OCAST timely copies of reports on any audits that include funds received from OCAST. The Contractor, at OCAST's request, shall provide OCAST with an independent audit report of all funds expended on each contract in which the amount of OCAST funds awarded. In the event an audit results in the determination that the Contractor, or designated fiscal agent, has expended contract funds on unallowable costs, the Contractor, or designated fiscal agent, shall reimburse OCAST in full for all such costs.

APPLICATION GUIDELINES FOR COMPLETING THE SUPPLEMENT APPLICATION:

Items 20, 22 through 27 are prepared on 8 ½ x 11-inch white paper with not less than 0.5-inch margins with a font size not smaller than 10-pt, with single to 1.5 spacing. Fonts for the text of the proposal must be Arial, Helvetica, Palatino, Computer Modern, or Georgia. Use the presentation order and headings as shown on Application Pages 11-19 (Items 20, 22 through 27). Section text length page limitations include text, inserted graphs, charts, and figures as part of the total section page length. If a section is not applicable it must be acknowledged by number and title and indicated as “Not Applicable.”

THE APPLICATION FORMS BEGIN ON THE NEXT PAGE

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

Oklahoma Applied Research Support (OARS) R&D Faculty and Student Internships Partnership Supplement PROPOSAL APPLICATION FORM AND REQUIRED ATTACHMENTS

1. Title

| |
|---------------------------------------|
| Title of Proposal (Maximum 56 spaces) |
|---------------------------------------|

2. Original Project Being Supplemented

| |
|-----------------|
| Project Number: |
|-----------------|

3. Months of Supplement

| |
|----------------------------------|
| (Maximum 12 months) _____ months |
|----------------------------------|

4. Amount of OCAST Funds Requested

| |
|------------------------|
| (Maximum \$20,000) \$: |
|------------------------|

5. Requested Start Date

| |
|--|
| |
|--|

6. Number of proposed interns

| | |
|--------------------------------|------------------|
| Undergraduate Student Interns: | Faculty Interns: |
|--------------------------------|------------------|

7. Technology Development

| | | |
|---|--|--|
| Check a single box that <u>best</u> describes the research technology to be developed under this award. | | |
| <input type="checkbox"/> Advanced Materials | <input type="checkbox"/> Energy | <input type="checkbox"/> Photonics |
| <input type="checkbox"/> Biotechnology | <input type="checkbox"/> Environmental | <input type="checkbox"/> Subassemblies & Components |
| <input type="checkbox"/> Chemicals | <input type="checkbox"/> Factory Automation | <input type="checkbox"/> Test & Measurement |
| <input type="checkbox"/> Computer Hardware | <input type="checkbox"/> Manufacturing Equipment | <input type="checkbox"/> Telecommunications/Internet |
| <input type="checkbox"/> Computer Software | <input type="checkbox"/> Medical | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Defense | <input type="checkbox"/> Pharmaceuticals | <input type="checkbox"/> Other _____ <small>(specify)</small> |

8. Principal Investigator (PI) Information

| | |
|---|------------------|
| Name of Principal Investigator: | |
| Position or Title: | Terminal Degree: |
| Address: Include Department, Division or Equivalent | Phone: |
| | Fax: |
| E-mail: | URL: http:// |
| I hereby accept responsibility for the scientific conduct of the project and for providing the materials required for contract performance evaluation. I give consent for the materials in this application to be viewed, as required by members of the OCAST staff, Board, Applied Research Committee and review panels. | |
| Signature of PI | Date |

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

9. Co-Principal Investigator (Co-PI) Information (a Co-PI is not required)

| | |
|---|------------------|
| Name of Co-Principal Investigator: | |
| Position or Title: | Terminal Degree: |
| Address: Include Department, Division or Equivalent, and Zip+4 | Phone: |
| | Fax: |
| E-mail: | URL: http:// |
| I hereby accept responsibility for the scientific conduct of the project and for providing the materials required for contract performance evaluation. I give consent for the materials in this application to be viewed, as required by members of the OCAST staff, Board, Applied Research Committee and review panels. | |
| Signature of PI | Date |

10. Official Acting as Fiscal Agent

| | |
|--|---|
| If multiple contractors, show official of organization designated as Fiscal Agent. This is the official to whom OCAST will send all contract payments. | |
| Name | |
| Title | |
| Name of Applicant Organization Acting as Fiscal Agent | |
| Mailing Address: Include Department, Division or Equivalent, Zip+4 | Phone |
| | Fax |
| | County |
| E-mail | URL: http:// |
| Organization NAICS code | Organization Federal Employee Identification Number (FEI) |

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

11. Designated Contract Official at Fiscal Agent Organization

Show person designated as the Contracting Official. This is the official to whom OCAST will send all award of contract correspondence including (1) the award letter, (2) requests for information and documentation, (3) the initiated contract, (4) the executed contract and (5) progress report and performance evaluation information and requests. If multiple applicants, the designated Contracting Official is responsible for sharing contractual information with all other applicant organizations. This official certifies all student interns are undergraduate students and the interns are legally eligible to work in the U.S.

| | |
|--|-----------------|
| Name: | |
| Title: | |
| Name of Applicant Organization Acting as Designated Contract Official: | |
| Address: | Phone: |
| | Fax: |
| E-mail: | URL: http:// |

12. Other Applicant Organizations. All applicant organizations agree to be party to the contract.

| | |
|---|-----------------|
| 12a. Name of Official Signing for Other Applicant Organization: | |
| Title: | |
| Address: (Including Zip+4) | Phone: |
| | Fax: |
| E-mail: | URL: http:// |

| | |
|---|-----------------|
| 12b. Name of Official Signing for Other Applicant Organization: | |
| Title: | |
| Address: | Phone: |
| | Fax: |
| E-mail: | URL: http:// |

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

13. Certification of Assurances

I certify that the statements and budget figures herein are true and complete. If an Oklahoma Applied Research Support (OARS) Contract is awarded, I accept the obligation to comply with the laws of the State of Oklahoma and the policies of the Oklahoma Center for the Advancement of Science and Technology (OCAST) as they pertain to the performance of this project.

| | |
|---|-------|
| Signature of Official Signing for Applicant Organization Acting as Fiscal Agent (same name as in Item 10.) | Date: |
| Signature of Official Signing for Applicant Organization Acting as Designated Contract Official (same name as in Item 11.) | Date: |
| Signature of Official Signing for Other Applicant Organization (same name as in Item 12a) | Date: |
| Signature of Official Signing for Other Applicant Organization (same name as in Item 12b) | Date: |

14. Intern Host Sites

Include name and address of organization, as well as the name, telephone number, and e-mail address of the research mentor(s).

PI Name:

Supplement Number: APS10.1-

15. Abstract

Project Title: (No more than 56 letters and spaces).

Name and address of Applicant Organization(s) (include Zip+4):

Name, Title and Department of Principal Investigator and Co-Principal Investigators:

Benefiting Firm(s): If an Applicant Organization is not a firm, name the benefiting firm(s) and location(s).

Match Summary: Name the match source(s), the percent contribution, and the location for each source.

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

15. Abstract (continued)

Include a short description of the research project(s), a summary of the intern partnership program and the benefits to faculty and student interns, to institutions of higher education, to Oklahoma firms or farms, and to the State of Oklahoma. Limit to this space; do not use continuation pages.

Five Key Words which describe the research project(s):

Select from the following chart the single research area that best describes the research. Copy the exact name and (number) to this box:

| |
|--|
| |
|--|

Research Area Chart. Do not include with proposal.

| | |
|---|--|
| <p>BIOTECHNOLOGY (B0000)</p> <p><input type="checkbox"/> Animal & Plant Biotechnology (B0100)</p> <p><input type="checkbox"/> Biomolecular & Biomimetic Materials (B0200)</p> <p><input type="checkbox"/> Bioprocessing/Biomedical Engineering (B0300)</p> <p><input type="checkbox"/> Bioinformatics (B0400)</p> <p><input type="checkbox"/> Diagnostic and Therapeutic Biotechnology (B0600)</p> <p><input type="checkbox"/> Marine Biology (B0700)</p> <p><input type="checkbox"/> Other Biotechnology (B9900)</p> <p>ELECTRONICS/COMPUTER HARDWARE/COMMUNICATIONS (E0000)</p> <p><input type="checkbox"/> Semiconductors (E0100)</p> <p><input type="checkbox"/> Electronic Systems (E0200)</p> <p><input type="checkbox"/> Microelectromechanical Technology (E0300)</p> <p><input type="checkbox"/> Computer Hardware (E0500)</p> <p><input type="checkbox"/> Microelectronic Fabrication Technology (E0600)</p> <p><input type="checkbox"/> Communication for Data, Voice, Video (E0700)</p> <p><input type="checkbox"/> Electronic Instrumentation/Sensors & Control Systems (E0800)</p> <p><input type="checkbox"/> Optics & Photonics (E0900)</p> <p><input type="checkbox"/> Other Electronics (E9900)</p> <p>INFORMATION TECHNOLOGY (I0000)</p> <p><input type="checkbox"/> Computer Systems and Software Applications (I0200)</p> <p><input type="checkbox"/> Computer-Aided Design & Testing Systems (I0300)</p> <p><input type="checkbox"/> Imaging & Image Processing (I0400)</p> <p><input type="checkbox"/> Cognitive Systems (I0500)</p> <p><input type="checkbox"/> Pattern Recognition (I0600)</p> <p><input type="checkbox"/> Internet Infrastructure (I0700)</p> <p><input type="checkbox"/> Security & Biometrics (I0800)</p> <p><input type="checkbox"/> Other Information/Computer Entertainment (I9900)</p> | <p>MANUFACTURING (DISCRETE) (M0000)</p> <p><input type="checkbox"/> Automobile Manufacturing (M0100)</p> <p><input type="checkbox"/> Aircraft Manufacturing (M0200)</p> <p><input type="checkbox"/> Other Transportation Manufacturing (M0300)</p> <p><input type="checkbox"/> Intelligent Controls (M0400)</p> <p><input type="checkbox"/> Machine Tools (M0500)</p> <p><input type="checkbox"/> Materials Handling (M0700)</p> <p><input type="checkbox"/> Intelligent Manufacturing (M0800)</p> <p><input type="checkbox"/> Avionics (M0900)</p> <p><input type="checkbox"/> Other Discrete Manufacturing (M9900)</p> <p><input type="checkbox"/> Energy Conversion (Motors, Generators, etc. (N0300)</p> <p><input type="checkbox"/> Energy Generation/Distribution (N0500)</p> <p>ADVANCED MATERIALS/CHEMICALS (A0000)</p> <p><input type="checkbox"/> Abrasives, Adhesives, Ceramics, Coatings, and Composites (A0500)</p> <p><input type="checkbox"/> Computer-Based Design of Chemical/Materials (A0600)</p> <p><input type="checkbox"/> Polymers Synthesis & Polymer Fabrication Technologies (A0800)</p> <p><input type="checkbox"/> Metals & Alloys (A1000)</p> <p><input type="checkbox"/> Building /Construction Materials (A1200)</p> <p><input type="checkbox"/> Other Materials (A9900)</p> <p><input type="checkbox"/> Separation Technology (H0100)</p> <p><input type="checkbox"/> Catalysis/Biocatalysis (H0200)</p> <p><input type="checkbox"/> Food Processing and Preservation (H1500)</p> <p><input type="checkbox"/> Other Continues Manufacturing (Pulp/Paper, Textiles) (H9900)</p> <p><input type="checkbox"/> Energy Resources/Petroleum (N0200)</p> <p><input type="checkbox"/> Energy Storage/Fuel Cell, Battery (N0400)</p> <p><input type="checkbox"/> Environmental Technologies (N0600)</p> <p>OTHER (Z0000)</p> <p>Research/Science/Technology Area Not Listed Above</p> <p>Specify _____</p> |
|---|--|

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

16. Project Budget. Direct Costs Only. Prepare and attach a budget page. In addition prepare a budget justification (see Item 20).

| |
|--------------|
| Months _____ |
|--------------|

| Personnel Applicant Organization(s) Only | | Effort | Amount Requested (in Dollars Only) | | |
|--|-------------------|--------|------------------------------------|----------|--------|
| Name | Title or Position | HR/WK | OCAST | Matching | TOTALS |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Subtotal | | | | | |
| Travel | | | | | |
| Subtotal | | | | | |
| Supplies (Itemize by category) | | | | | |
| Subtotal | | | | | |
| Equipment (List items over \$500) | | | | | |
| Subtotal | | | | | |
| Contractual Services (Itemize) | | | | | |
| Subtotal | | | | | |
| Other Direct Costs (Itemize) | | | | | |
| Subtotal | | | | | |
| TOTAL DIRECT COSTS | | | | | |

| | |
|------------------------|--------------|
| OCAST APPROVAL: | DATE: |
|------------------------|--------------|

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

17. Source and Amount of Matching Funds

NOTE: THE PI MUST SUBMIT THIS FORM FOR EACH PROJECT YEAR FOR WHICH **CASH** AND/OR A **GRANT(S)** OR **CONTRACT(S)** WILL BE PROVIDED AS MATCH. MONIES CERTIFIED AS MATCH, MUST BE PLACED IN AN ACCOUNT HELD BY AN ORGANIZATION THAT IS A PARTY TO THE CONTRACT.

| Source of Cash Match | Date Received | Contracting Organization that holds Matching Account | Account Number | Amount |
|---|--------------------------|--|----------------|-----------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Subtotal | | | | \$ |
| Source of Grant(s) or Contract(s) Match | Inclusive Dates of Award | Contracting Organization that holds Matching Account | Account Number | Amount |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Subtotal | | | | \$ |
| Total Match | | | | \$ |

| | |
|------------------------|--------------|
| OCAST APPROVAL: | DATE: |
|------------------------|--------------|

| | |
|----------|-----------------------------|
| PI Name: | Supplement Number: APS10.1- |
|----------|-----------------------------|

18. Matching Funds Certification

| | |
|--|--------------|
| Organization 1: | |
| Organization 2: | |
| Organization 3: | |
| Amount of Cash total to be provided for match | \$ |
| Dollar Amount of Grant(s) or Contract(s) total to be provided for match | \$ |
| Dollar Value of Machinery or Equipment total to be provided for match | \$ |
| IMPORTANT: ONLY INSTITUTIONS OF HIGHER EDUCATION OR NONPROFIT RESEARCH FOUNDATIONS ARE ELIGIBLE TO USE EQUIPMENT OR MACHINERY FOR MATCHING FUNDS REQUIREMENTS. IN SUCH INSTANCES, THE EQUIPMENT OR MACHINERY MUST ORIGINATE FROM SOURCES OTHER THAN STATE-APPROPRIATED FUNDS AND THE REQUIRED DOCUMENTATION RELATED TO THE ALLOWABLE VALUATION MUST BE SUBMITTED WITH THE ORIGINAL PROPOSAL. | |
| MATCH AMOUNT TOTAL | \$ |
| <p>I certify that the monies, grants and contracts, and/or machinery or equipment, described on this form and detailed on the following OARS Matching Funds Documentation for the project year designated above will be available for use on this project as of the contract start date.</p> <p>I certify that if machinery or equipment is being used as matching funds, that each item of machinery or equipment provided for match (1) has been received by the institution of higher education or non-profit research organization, (2) if donated to the institution of higher education or non-profit research organization, has been used only in testing to ensure quality control or for demonstration purposes by a wholesaler or retailer and the fair market value on the date of the gift, and if purchased by the institution, the amount paid is certified by an invoice held by the institution.</p> | |
| Name of Principal Investigator: | |
| Signature of Principal Investigator: | Date: |
| Name of Designated Contracting Official: | |
| Signature of Designated Contracting Official: | Date: |

| | |
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| OCAST APPROVAL: | DATE: |
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| PI Name: | Supplement Number: APS10.1- |
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19. Machinery or Equipment Matching Funds

| | |
|---|----|
| NOTE: ONLY HIGHER EDUCATION INSTITUTIONS AND NONPROFIT RESEARCH FOUNDATIONS ARE ELIGIBLE TO USE MACHINERY OR EQUIPMENT AS MATCHING FUNDS | |
| Description of the equipment. | |
| Justification of the use of the equipment for the project. | |
| If the equipment has been donated, indicate the fair market value on the date of the gift. | \$ |
| If the equipment was purchased by the institution, indicate the amount as verified by the invoice held by the institution. | \$ |
| Justification of the value of the equipment for the project. The evaluation should be based upon (a) the fair market value, if a gift, or the amount paid for the machinery or equipment by the applicant organization as verified by invoice (74 O.S., Section 5060.19); (b) the useful life of the equipment relative to the term of the project; (c) the relevance and intensity of the proposed use of the equipment in the project and (d) the predicted value of the equipment at the end of the project. | |
| Proposed matching value of the equipment: | \$ |

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IMPORTANT: Prepare on 8 ½ x 11-inch white paper with not less than 0.5-inch margins with a font size not smaller than 10-pt and single to 1.5 spacing. Fonts for the text must be Arial, Helvetica, Palatino, Computer Modern, or Georgia.

20. Required Attachment. Prepare an explanation and justification for the budget (4 page maximum). Incomplete explanations may result in a requested item not being approved or the entire project not recommended for funding. This is a very important part of the proposal.

Project Budget -- Complete the required budget information. Account for all project funds – both monies requested from OCAST and the proposed matching funds. All amounts should be in dollars. The approved budget amount is established by the reviewers and cannot be increased after the date of the award. If obvious budget items are omitted, provide information regarding the alternative resources available to provide for these items in the budget justification. Budgeting is discussed at the proposal preparation workshops.

Personnel. List the names and positions of all personnel involved in the project, both professional and nonprofessional, whether or not salaries are requested. For each participant estimate hours per week in relation to total professional activity commitment to the applicant organization. In computing estimated salary charges to an OARS contract, an individual’s base salary must represent the total authorized annual compensation an applicant organization would be prepared to pay for a specified work period. The base salary must exclude income that an individual may be permitted to earn outside of full-time duties to the applicant organization and may not be augmented or supplemented by funds from a professional service contract. Fringe benefits may be requested to the extent that they are treated consistently by the applicant organization as a direct cost to all sponsors. The salary requests typically support the interns with a combination of OCAST and Match funds for intern salary and fringe benefits.

Travel. Describe the purpose of any travel, giving the number of trips and the professional activities involved, the destination(s) and the number of individuals for whom funds are requested. The amount requested for travel must be fully explained in the Budget Justification. The amount of travel approved by the reviewers cannot be increased after the date of the OARS award. Include travel for the annual conference.

Supplies. List supplies needed to manage the Internship program. In general, the intern Host organization provides the research supplies as a normal part of the research activity at no charge. Therefore, explain fully the unique aspects of this program when research supplies are included as a part of the budget.

Equipment. List equipment needed to manage the Internship program. In general the intern Host organization provides the research equipment as a normal part of the research activity. Explain fully the unique aspects of this program when research equipment is included as a part of the budget. List separately each item of equipment with a unit acquisition cost of \$500 or more.

Fully explain the purchase of computers since, in most cases, reviewers have denied requests for computers not dedicated to OARS research.

Contractual Services. Itemize and provide detailed description. Such charges would be unusual for this program.

Other Expenses. Itemize other expenses, such as office supplies, telephone/fax charges, and, e.g., costs of supplies for intern presentations at poster sessions or meetings.

Indirect costs are not allowable as a budget item. If an organization requires direct cost reimbursement for project specific utility or compliance costs, these should appear as line items in the budget along with both the method of calculation and an explanation for their inclusion.

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21. Complete this page as a Table of Contents, add page numbers that correspond to the application.

| Table of Contents Item | Page |
|--|------|
| Application Pages 1-4 (Items 1-14) | 1 |
| Abstract (Item 15) | 5 |
| Budget Page (Item 16) | 7 |
| Source and Amount of Matching Funds (Item 17) | 8 |
| Matching Funds Certification (Item 18) | 9 |
| Machinery of Equipment Matching Funds (Item 19, if needed) | |
| Budget Justification (Item 20) | |
| Table of Contents (Required Attachment Item 21) | |
| Biographical Information for P.I., or co-P.I (Required Attachment Item 22) | |
| Biographical Information for Mentor(s) (Required Attachment Item 23) | |
| Biographical Information for Faculty Intern(s) (Required Attachment Items 24) | |
| Commitment of Support and Benefit Analysis (Required Attachment Item 25) | |
| Benefits to the Program (for Abbreviated Format) | |
| Project Plan (Required Attachment Item 26) | |
| The Interim Report (Required Attachment Item 27) | |
| Appendix I. Sample Intern Reports (Required Attachment for Item 27) | |
| Appendix II. Sample Evaluation Instruments (Required Attachment for Item 27) | |
| Appendix III. Additional Materials (limit 5 pages) (Optional Attachment for Item 27) | |

IMPORTANT NOTE: Items 22-27 below are prepared on 8 ½ x 11-inch white paper with not less than 0.5-inch margins with a font size not smaller than 10-pt, and single to 1.5 spacing. Fonts for the text of the proposal must be Arial, Helvetica, Palatino, Computer Modern, or Georgia. Use the presentation order and headings as shown below. Section text length page limitations include text, graphs, charts, and figures. If a section is not applicable it must be acknowledged and indicated as not applicable. Proposals that are not in the required format may be returned without review.

22. Principal Investigator and Co-Principal Investigator Biographical Information

Required attachment. When a firm is the fiscal agent, the co-principal investigator would be the person who coordinates intern activities on a college campus. A co-PI is not required. Two page maximum for each professional.

- A. Name
- B. Title
- C. Education (provide education, baccalaureate through postdoctoral; include institution and location, degree and year conferred and field of study, with the most recent first).
- D. Describe experience at managing programs similar to this intern program.**
- E. Provide research and professional experience. Beginning with the present position, list in chronological order, previous employment, experience and honors. List in chronological order beginning with the most recent, the titles and complete references to recent representative publications, especially those most pertinent to this application.
- F. Describe previous OCAST support; include project number, and results.

23. Mentor Biographical Information

Required attachment. The mentor is the person at the intern host site who works most closely with the interns on the research project. Two page maximum for each mentor.

- A. Name
- B. Title
- C. Education (provide education, baccalaureate through postdoctoral; include institution and location, degree year conferred and field of study, with the most recent first).
- D. Describe experience at mentoring beginning technically trained coworkers and subordinates. The Reviewers critically evaluate the suitability of the mentor(s).**
- E. Provide applied research and professional experience. Beginning with the present position, list in chronological order, previous employment, experience and honors. List in chronological order beginning with the most recent, the titles and complete references to recent representative publications, especially those most pertinent to this application.
- F. Describe previous OCAST support; include project number, and results.

24. Faculty Intern Biographical Information.

Required attachment. For a project with a Faculty Intern, the Faculty intern may be the PI or co-PI. Two page maximum for each faculty intern.

A. Name

B. Title

C. Statement of anticipated benefits from being a faculty intern.

D. Education (provide education, baccalaureate through postdoctoral; include institution and location, degree year conferred and field of study, with the most recent first).

E. Provide research and professional experience. Beginning with the present position, list in chronological order, previous employment, experience and honors. List in chronological order beginning with the most recent, the titles and complete references to recent representative publications, especially those most pertinent to this application.

F. Describe previous OCAST support; include project number, and results.

25. Letters of Commitment and Benefit

Required Attachment. The Reviewers critically review these 1 or 2 page letters. These letters must be specific to the application and not a generalization.

1. Letter of Commitment and Benefit signed by an official of the fiscal agent organization that is the lead applicant organization is required.

2. A Letter of Commitment and Benefit signed by an official of a collaborating Oklahoma firm, non-profit research organization, college or university that is an additional applicant organization is required. Note: organizations providing matching monies often sign as an additional applicant (and contractor, if awarded) to allow the organization to set up a project account for matching monies rather than provide match through the lead organization.

3. Letter of Commitment and Benefit from a collaborating Oklahoma firm, non-profit research organization, college or university that is not an applicant or additional applicant may be included. Such organizations will include items A, B, and C. below as appropriate or may include other information to aide the reviewers. Reviewers find it helpful to understand the relationship between all parties and their commitment to the program. For example, in an application from a company, you may include a letter from a faculty member assisting you to recruit students and/or the Dean/Department Chair/Head of the School acknowledging the importance of the program to the students. Letters from the CEO or President of benefiting organizations beyond the educational organizations and research sites, such as Oklahoma farm and ranch associations may be included in this section.

A. Include an assessment of the potential for attracting future federal or private funds to continue the internship program beyond this OARS project. How will the applicant use this support to create a sustainable internship program that does not need OARS support? (Required for all applicant organization letters.)

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B. Include (1) specific organizational commitments to the project for such items as equipment, computer services, facilities, release time for key personnel, secretarial support, and technical support. (2) a statement of organizational commitment to the proposed project beyond the required matching monies and (3) a summary of plans to continue the internship program beyond the project. (Required for all applicant organization letters.)

C. For the R&D sites also briefly discuss how the applied R&D performed by the company, or on behalf of the company by another organization (e.g., a non-profit research organization or a college), will (1) lead to innovation, new knowledge or technology and is not training or technical assistance for the business, (2) has a reasonable probability to enhance employment opportunities within Oklahoma, and (3) is technically sound and will lead to a measurable result. Include a specific estimate of the potential economic gain the research will give the company. Examples of economic gain include increased payroll, jobs created or retained, increase in gross sales, cost avoidance, productivity, and federal contracts won. This statement is very important. (Required for all R&D site letters.)

26. Project Plan (Typically this section takes 8 - 10 pages.)

Required Attachment. The applicant must complete all of the following in this order: Begin each section with a section heading.

A. Describe the general nature of the applied R&D to be performed without including proprietary information. Include a list of research objectives. *Typically this will be 1 page for each research project.*

B. Describe the applied R&D facility(s) where the student and/or faculty interns will work. Show that adequate equipment and supplies are available for the project. *Typically this will be 1 page for each venue.*

C. Generally describe the work the student interns will perform, and how the interns contribute to meeting the research objectives. When there is a faculty intern describe the work the faculty intern will perform and how it meets the research objectives. *Typically this will be 1-2 pages for each project/venue.*

D. IRB and hazardous substances notification.

After an award is made applicants will be required to provide certification that all regulations pertaining to research use of **HUMAN SUBJECTS, HUMAN DERIVED MATERIALS, HUMAN DATA; RECOMBINANT DNA; VERTEBRATE ANIMALS; NARCOTICS, DANGEROUS DRUGS, RADIOISOTOPES; and BIOLOGICAL HAZARDS** have been satisfied. Special note: Student Interns supported under this program must not be research subjects for any research project that requires IRB approval.

Indicate in this section if the research project involves any of the above research components and how the appropriate certifications/approvals will be obtained. Mark this item NOT APPLICABLE if these components are not a part of the research project. *Typically this will be 1 page for each project/venue.*

E. i. Describe the role and duties of the applied research mentor(s).

- ii. Describe the activities of the intern for the first two weeks of the internship.
- iii. If a mentor's principal employer is a non-profit research organization, college or university, describe each mentor's experience in performing applied R&D that has led to commercialized products, processes or services. *Typically this will be 1-2 pages.*
- F. Describe the role and duties of the principal investigator and co-PI. Note: a co-PI is not required. *Typically this will be 1 page.*
- G. If all or part of the intern experience is at a non-profit research organization, college or university, describe the specific relationship between each participating company and the non-profit or university laboratory. Fully explain why the internship is not at the participating company site. *Typically this will be 1-2 pages.*
- H. Carefully explain the plan for selecting and assigning the interns. R&D Intern Partnerships Projects must involve one or more students and/or faculty working at an R&D facility(s) located in Oklahoma. Describe the potential intern pool. When a college or university is not a formal partner, include the process for contacting potential interns and the relationship between the applicant organization and Oklahoma colleges and universities. *Typically this will be 1-2 pages.*
- I. For faculty and student interns describe the process that will be used to monitor the intern work performance and to evaluate performance. Include evaluation instruments in Item 27. Appendix II. *Typically this will be 1 page plus the sample instrument(s).*
- J. Describe the process to be used for the intern to prepare reports. In general terms, without including proprietary information, the intern should describe the work done, the skills acquired and the benefits accrued. The intern should use the style guide of the company or of the institution of higher education to prepare each report that describes the internship experience. A minimum of monthly progress reports should be a part of the internship experience. The PI, as part of the annual progress report will include sample reports. *Typically this will be 1-2 pages.*
- K. Describe the process the fiscal agent organization will use to track the academic and professional progress of each intern for five years after the internship is served. This information will be reported to OCAST as a part of the annual Impact Report request for information that is required of all contractors. Information required, as a minimum, will be institutions of higher education attended, degrees earned, where employed, and a current address for the intern. *Typically this will be 1 page.*

27. The Interim Report**COVER PAGE**

Provide the following information on the report cover page.

- A. Project Number
- B. Interim Report
- C. Project Title
- D. P.I. Name and Lead Applicant Organization (Location)
- E. Co-P.I. Name and Organization
- F. Intern Mentor(s) and location(s) of Intern performance.
- G. Benefiting Firm(s) and location.
- H. Other organizations providing project resources (list in order of decreasing support level).
- I. Current funding period (e.g., September 1, 2007 – August 31, 2008); if the year has been extended, show final date of the extension, e.g., September 1, 2007 – September 30, 2008).
- J. Overall funding period.
- K. Dates the report covers.

I. EXECUTIVE SUMMARY

Briefly summarize work-to-date for a lay reader; do not include details that must be kept proprietary (1 page maximum). The Executive Summary and the Cover Page should be produced for duplication and distribution in response to citizen, legislative, gubernatorial or other state organization requests. This summary is public information.

- A. Describe the benefits of the intern experience to student and faculty interns, the involved industry, the institution of higher education institution and the State of Oklahoma of this OCAST funded research project.
- B. State the number of interns and their Oklahoma hometown, the name and location of the organizations hosting the interns and the name and location of the benefiting firms.
- C. Describe the research objectives reached by each intern.

II. ORGANIZATION PARTICIPANTS

List the organizations currently participating in the project, state the type of organization for each--business/industry, university, non-profit--and describe the type and level of involvement of each organization.

III. INTERN SELECTION PROCESS.

Describe the steps used to obtain a pool of potential interns as well as the intern selection process. Describe how the interns were assigned and their progress monitored. Include in an Appendix copies of handouts, flyers, and posters.

IV. INTERN CHARACTERISTICS AND REPORTS

State the number of interns and their Oklahoma hometown, the name and location of the organizations hosting the interns and the name and location of the benefiting firms. Indicate field of study, degree pursued or held, by the student and/or faculty intern. Describe intern future plans which have been influenced by the internship experience. Briefly summarize selected intern prepared reports and attach the report(s) as Appendix I. Remove any “grade mark” from the report. Include a copy of instruments used to evaluate intern/ mentor/ program performance in Appendix II.

V. WORK ACCOMPLISHED

Discuss the research completed on the project during the current funding year; specifically, assess (A) the significant technical achievements, (B) the notable technical achievements and (C) the success in achieving the project objectives in the time projected including comment on any planned but unachieved objectives.

VI. PUBLICATIONS

List journal articles and other publications, which have been submitted and/or published during the funding period, that incorporates any portion of the work supported by the OCAST contract; categorize under the headings of referred, non-referred, books, chapters, abstracts and presentations. List with bibliographic information any newspaper articles or other descriptions of the research in newsletters, lay magazines, etc. and attach a copy to the report as an Appendix.

VII. BENEFITS AND ECONOMIC IMPACT

Describe the benefits of the intern experience to student and faculty interns, the involved industry, the institution of higher education and the State of Oklahoma of this OCAST funded research project. Include benefits to other students and faculty members who were not formally a part of the internship program. The P.I. should make an effort to also include letters or statements from businesses, who have collaborated on the project, that quantify the economic benefits, actual or projected, as a result of the project. The quantification could include: jobs created or retained, percent increase of market share, dollar amount of increase in sales, dollar savings in cost-containment, or percent increase in productivity. State the plans to build a sustainable internship program.

VIII. INTERN PROFESSIONAL PROGRESS

Describe the process that is used to track the academic and professional progress of each intern for five years after the internship is served. This information will be reported to OCAST as a part of the annual Impact Report request for information that is required of all contractors. Information required, as a minimum, will be institutions of higher education attended, degrees earned, where employed, and a current address for the intern.

Appendix I. Sample Intern Reports**Appendix II. Sample Evaluation Instruments****Appendix III. Additional Materials (limit 5 pages)**

Sample Cover Page**Project AP07.2-I08****Interim Report****An Excellent Internship Experience**

**Principal Investigator: I. M. Good
Best Institution of Higher Education
Goodplace, Oklahoma**

**Intern Mentor: J. P. Likeinterns
We R. Best and Family
Great, Oklahoma**

**Benefiting Firms:
We R. Best and Family
Great, Oklahoma
Glad to Help, Inc.
Wonderful, Oklahoma**

Current funding period: September 1, 2008 – September 30, 2009

Overall funding period: September 1, 2008 – August 31, 2010

Dates the report covers: September 1, 2008 – January 31, 2009

Principal Investigator Name:

Statement of Intent Form

First FY10 R&D Faculty and Student Intern Supplement Awards

The deadline to submit a Statement of Intent is 5:00 p.m. August 5, 2009

Only those who have submitted a Statement of Intent on or before the intent deadline are eligible to submit an application. A Statement of Intent is required for each proposal submitted. The Statement of Intent is to be submitted to the following address:

Intern Partnerships Program
Programs Division
Oklahoma Center for the Advancement of Science and Technology (OCAST)
755 Research Parkway, Suite 110
Oklahoma City, Oklahoma 73104-3612

The Statement of Intent Forms may be faxed to (405) 319-8426 to meet the deadline, with the signed original mailed. However, OCAST is not responsible if, for any reason, the fax transmission is not received.

Note: The information with respect to title, applicant organization, and funds requested may be different on the proposal; however, at least one of the persons listed must be the PI on the proposal.

| | |
|--|------------------------|
| Title of Proposal (Maximum 56 spaces): | |
| Applicant Organization(s) | |
| Project # of program to be supplemented: | OCAST Contract Number: |
| Estimated Request for OARS Funds (not less than \$2,500 nor more than \$20,000): | |
| Name of Principal Investigator: | |
| Position or Title: | Terminal Degree: |
| Address: Include Department, Division or Equivalent, and Zip+4 | Phone: |
| | Fax: |
| E-mail: | URL: http:// |
| Signature of PI | Date |

Principal Investigator Name:

Name of Co-Principal Investigator:

Position or Title: Terminal Degree:

Address: Include Department, Division or Equivalent Phone:
Fax:

E-mail: URL:
http://

Signature of Co-PI Date

Name of Co-Principal Investigator:

Position or Title: Terminal Degree:

Address: Include Department, Division or Equivalent Phone:
Fax:

E-mail: URL:
http://

Signature of Co-PI Date

Check a single box that best describes the research technology to be developed under this award.

- | | | |
|---|--|--|
| <input type="checkbox"/> Advanced Materials | <input type="checkbox"/> Energy | <input type="checkbox"/> Photonics |
| <input type="checkbox"/> Biotechnology | <input type="checkbox"/> Environmental | <input type="checkbox"/> Subassemblies & Components |
| <input type="checkbox"/> Chemicals | <input type="checkbox"/> Factory Automation | <input type="checkbox"/> Test & Measurement |
| <input type="checkbox"/> Computer Hardware | <input type="checkbox"/> Manufacturing Equipment | <input type="checkbox"/> Telecommunications/Internet |
| <input type="checkbox"/> Computer Software | <input type="checkbox"/> Medical | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Defense | <input type="checkbox"/> Pharmaceuticals | <input type="checkbox"/> Other _____ (specify) |