2018-2019 Proposal Form

This form is to be completed by the proposed project PI and emailed to info@roadsafety.unc.edu by end of day on **January 18, 2019**.

*If funded*, additional information may be required to populate the [CSCRS website](file:///%5C%5Cstorage.unc.edu%5Cvcred%5Chsrc%5Cprojects%5CProjectsNEOCvol%20%28T%29%5CCSCRS%5CResearch%20Program%5CProject%20Info%20Forms%5CQuick%20Start%20_Year%201%5CVersions%5Croadsafety.unc.edu), the [RiP database](https://rip.trb.org/) and for progress reporting for this project. Questions? Please contact Laura Sandt at sandt@hsrc.unc.edu or 919-962-2358.

**Section 1: Basic Project Information**

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| Project Title: |
| Is this related to a previously funded CSCRS research project?[ ]  No [ ]  Yes / If Yes, Project Name: |
| Project Start Date: (A*nticipated start date, after 5/1/2019)*yyyy-mm-dd | Project End Date:yyyy-mm-dd |

**Section 2: Proposed Principal Investigator Information**

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| Name of Principal Investigator (PI1) and Affiliation (select one): / [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK |
| PI1 ORCID (Open Research and Contributor ID) Number: (*Required; visit* [*orcid.org*](http://www.orcid.org) *to create an ID*) |
| PI1 Phone Number: |
| PI1 Email: |
| (*If applicable*) Name of Co-Principal Investigator (PI2) and Affiliation (select one): / [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK |
| PI2 ORCID (Open Research and Contributor ID) Number: (Required; visit [orcid.org](http://www.orcid.org) to create an ID) |
| PI2 Phone Number: |
| PI2 Email: |

**Section 3: Project Collaboration Details** *(Please add fields as needed.)*

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| Partner Organization 1 – University Name: [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK [ ]  Other (select one) |
| Partner Organization 1 – Co-Investigator Contact Information:Name: Email:  |
| Partner Organization 2 – University Name: [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK [ ]  Other (select one) |
| Partner Organization 2 – Co-Investigator Contact Information:Name: Email:  |

**Section 4: Proposed Project Details**

**Problem Statement**

Brief summary of the nature of the problem that this study will address or the research gap that needs to be filled. ***Please limit response to a half-page.***

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**Summary of Key Project Goals and Objectives**

In a few sentences or a bulleted list, succinctly describe what this project aims to achieve. If selected, this information will be used to describe the project on the CSCRS website and in CSCRS performance reports.

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**Relationship to CSCRS Strategic Roadmap**

Select the primary Goal and Objective from the Strategic Roadmap that this project is related to, and describe in 3-4 sentences how the project will help achieve the goal/objective for the Center. This information will be used, if the project is selected, in CSCRS performance reporting to show accomplishments related to each Goal/Objective.

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| **This project PRIMARILY addresses Goal *1***[ ] ***, 2***[ ]  ***or 3***[ ] **, Objective \_\_\_\_\_\_\_\_\_\_ of the *CSCRS Strategic Roadmap.******The project will help achieve this goal/objective by…***Here you may also mention other relevant goals/objectives and relationship to other funded CSCRS efforts. |

**Project Proposal**

Describe the proposed project, approach, and team qualifications, being sure to cover:

* Key research questions/hypotheses and how they will be answered or approached
* Description of proposed activities/tasks, including use of any innovative methods or technologies
* Description of stakeholder involved or community-engaged research activities, if any
* Anticipated project outcomes and benefits
* Evidence of investigator or team qualifications or work already performed that will support this effort
* Description of student involvement in the research
* Any related professional development activities/plans for disseminating or implementing the research findings

***Please limit response to 6 pages or less, minimum 12 pt font***.

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**Summary of Deliverables/Products**

Please provide a list of scheduled deliverables for this project, including anything related to research, education, or professional development activities/materials.

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| * [insert deliverable]
* Data management plan (*CSCRS requirement for research projects*)
* Final Report (*CSCRS requirement for research projects*)
* PowerPoint summary slide deck (*CSCRS requirement for research projects*)
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**Define Future Implementation and/or Impacts**

Describe how the findings from this research might be implemented, including who would use the research findings or products, or be involved in any professional development activities? How might this advance the state of transportation safety or practice? Please describe the expected impacts of this project. ***Please limit response to 6-8 sentences.***

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**Section 5: Estimated Budget/Funding Information**

Estimated budgets should include F&A. Multi-year projects will be reviewed on an annual basis; additional year funding is not guaranteed.

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| --- | --- |
| Estimated Total Funding Requested from CSCRS: | $  |
|  | Year 1 | Year 2 | Year 3 |
| Estimated Distribution of CSCRS Project Funds per Collaborator Organization(s):  | UNC | $ | $ | $ |
| Duke | $ | $ | $ |
| FAU | $ | $ | $ |
| UCB | $ | $ | $ |
| UTK | $ | $ | $ |
| Estimated Total Match Funds from Non-Federal Sources: | $ |

|  |  |  |  |
| --- | --- | --- | --- |
| *University Obtaining Match Funds* | *Name of Organization Providing Match Funds* | *Match Amount* | *General Types of Activities* |
| [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK |  | $  |  |
| [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK |  | $  |  |
| [ ]  UNC [ ]  Duke [ ]  FAU [ ]  UCB [ ]  UTK |  | $  |  |

**Section 6: Supplemental Notes**

Please provide any additional, relevant information not covered in other fields on this form.

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**Section 7: Contract Information (For Internal Use Only)**

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| Date Updated:Month, Day, Year |
| Project Status:[x]  Proposed [ ]  Active |
| Contract Year:*CSCRS Year 3* |
| CSCRS Contract Number (to be assigned by HSRC in format, CSCRS2018R1, IF/WHEN FUNDED): *CSCRS2019RX* |
| CSCRS Project Manager (CSCRS Staff responsible for project schedules, progress, and management):[ ]  Caroline Mozingo (Education, Training)[x]  Laura Sandt (Research) |
| USDOT Program and Sub-Program (if any):*University Transportation Center Program* |
| Managing Organizations (Agency overseeing the management of the project):*Collaborative Sciences Center for Road Safety* |
| Source Agency (Agency entering the record): *Collaborative Sciences Center for Road Safety* |
| Record URL (External web link to project information on CSCRS website):*TBD* |
| USDOT Contract Number: *69A3551747113* |
| Source Agency (Agency entering the record): *Collaborative Sciences Center for Road Safety*  |
| Sponsor Organizations (agency or organization providing funding for the project):*Office of the Assistant Secretary for Research and Technology* |