

SAMPLE

Commonwealth Research Commercialization Fund (CRCF)

EMINENT RESEARCHER RECRUITMENT PROGRAM

PRINCIPAL INVESTIGATOR	
Salutation* (Select one)	Mr., Ms., or Dr.
First Name	Auto-populated (not modifiable)
Last Name	Auto-populated (not modifiable)
Job Title	Auto-populated (not modifiable)
Organization	Enter your organization name if different from that of the applicant organization.
Department	
Address*	Provide a physical address; no P.O. boxes.
City*	
State	Virginia (not modifiable)
Zip*	
County*	
Telephone	Auto-populated (not modifiable)
Email Address	Auto-populated (not modifiable)
AUTHORIZED REPRESENTATIVE	
Salutation* (Select one)	Mr., Ms., or Dr.
First Name*	
Last Name*	
Job Title*	
Organization	Enter your organization name if different from that of the applicant organization.
Department	
Address*	Provide a physical address; no P.O. boxes.
City*	
State*	
Zip*	
County*	
Telephone*	
Email Address*	
PROJECT INFORMATION	
CRCF Reference Number	Auto-populated (not modifiable)
Amount of CRCF Funds Requested*	Requests may not exceed \$250,000.
Matching Funds Amount*	Matching funds must be provided in an amount at least one-to-one to the CRCF request.
CRCF Program Type	Auto-populated from LOI (not modifiable)
Project Title	Auto-populated from LOI (not modifiable)
Project Summary*	Provide a 1-2 sentence (max) summary of your proposed CRCF project, in layman's terms, that may be used to publically describe your project.
Project Start Date*	(Earliest start date: June 15, 2020) MM/DD/YYYY
Project End Date*	MM/DD/YYYY
Industry Sector	Auto-populated from LOI (not modifiable)

*Required field

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Resubmission?*	Is this project a resubmission of a non-funded proposal from FY2012-19? <i>If yes, field will appear with prompt to enter the CRCF reference number for the most recent <u>non-funded</u> project; this is not the number of the FY2020 project which appears at the top of this section.</i>
Proposal* (PDF format)	Upload Field Save the file with the pre-assigned reference number, using nomenclature: CRCFREF#_Proposal (Example: ER20-999-CS_Proposal). Then, upload the completed Proposal in PDF format. When finished, click "Done". Only one (1) file is permitted in this upload field. File size may not exceed 5MB.
Budget* (Microsoft Excel format)	Upload Field Save the file with the pre-assigned reference number, using nomenclature: CRCFREF#_Budget (Example: ER20-999-CS_Budget). Then, upload the completed Budget in Microsoft Excel format. When finished, click "Done". Only one (1) file is permitted in this upload field. File size may not exceed 5MB.
Appendix* (PDF format)	Upload Field Save the file with the pre-assigned reference number, using nomenclature: CRCFREF#_Appendix (Example: ER20-999-CS_Appendix). Then, upload the completed Appendix in PDF format. When finished, click "Done". Only one (1) file is permitted in this upload field. File size may not exceed 5MB.
CERTIFICATION	
Certification*	<i>By submitting this application, the applicant certifies compliance with the eligibility requirements and other conditions outlined in the program Guidelines.</i>
REVIEW AND SUBMIT YOUR APPLICATION	
Please review your application and all uploaded materials. If you are not ready to submit the application at this time, click the "Save Only" button at the bottom of the screen. Clicking "Submit" will automatically send the application to CIT; once submitted, the application may not be modified.	

***Required field**