

CERTIFICATION OF NO ADDITIONAL GRANT-RELATED RESOURCES

TITLE OF PROPOSAL _____

PRINCIPAL INVESTIGATOR _____

FUNDING AGENCY _____

Duration of Proposal _____

Submission Date _____

Anticipated award date _____

Amount of Proposal _____

I hereby certify that if awarded this grant will require no additional Psychology Department or College of Liberal Arts and Sciences resources beyond those currently available to me and/or my co-investigators on this grant.

Printed Name of PI

Signature of PI

Date