

Form A – STTR Cover Sheet

1. PROPOSAL NUMBER: **08** - _ . _ _ _ _
2. RESEARCH TOPIC:
3. PROPOSAL TITLE:
4. SMALL BUSINESS CONCERN (SBC) RESEARCH INSTITUTION (RI)
 NAME: NAME:
 ADDRESS: ADDRESS:
 CITY/STATE/ZIP: CITY/STATE/ZIP :
 PHONE: FAX: PHONE: FAX:
 EIN/TAX ID: EIN/TAX ID:
 DUNS + 4: CAGE CODE:
5. AMOUNT REQUESTED: \$ _____ DURATION: _____ MONTHS
6. CERTIFICATIONS: THE ABOVE SBC CERTIFIES THAT:

<i>As defined in Section 2 of the Solicitation, the offeror qualifies as a:</i>		
a. SBC	Yes	No
Number of employees: _____		
b. The firm is owned and operated in the United States	Yes	No
c. Socially and economically disadvantaged SBC	Yes	No
d. Woman-owned SBC	Yes	No
e. HUBZone-owned SBC	Yes	No
f. Veteran-Owned SBC	Yes	No
<i>As described in Section 2.11 of the Solicitation, the partnering institution qualifies as a:</i>		
g. FFRDC	Yes	No
h. Nonprofit research institute	Yes	No
i. Nonprofit college or university	Yes	No
<i>As described in Section 3 of the Solicitation, the offeror meets the following requirements completely:</i>		
j. Cooperative Agreement signed by the SBC and RI enclosed	Yes	No
k. All eleven parts of the technical proposal included in part order	Yes	No
l. Subcontracts/consultants proposed? (Other than the RI)	Yes	No
i) If yes, limits on subcontracts/consultants met	Yes	No
m. Government equipment or facilities required (cannot use STTR funds)?	Yes	No
i) If yes, signed statement enclosed in Part 8	Yes	No
ii) If yes, non-STTR funding source identified in Part 8?	Yes	No
n. A signed Allocation of Rights Agreement will be available for the Contracting Officer at time of selection	Yes	No
<i>As defined in Section 3.2.4 of the Solicitation, indicate if:</i>		
o. Work under this project has been submitted for funding only to the NASA STTR Program	Yes	No
p. Funding has been received for work under this project by any other Federal grant, contract, or subcontract	Yes	No
<i>In accordance with Section 5.13.16 of the Solicitation as applicable</i>		
q. The offeror will comply with export control regulations	Yes	No

7. ACN NAME: PHONE: E-MAIL:
8. The SBC will perform ___% of the work and the RI will perform ___% of the work of this project.
9. I understand that providing false information is a criminal offense under Title 18 US Code, Section 1001, False Statements, as well as Title 18 US Code, Section 287, False Claims.
10. ENDORSEMENT BY SBC OFFICIAL:
 NAME: TITLE:
 PHONE: E-MAIL:
 ENDORSED BY: DATE:

NOTICE: This data shall not be disclosed outside the Government and shall not be duplicated, used, or disclosed in whole or in part for any purpose other than evaluation of this proposal, provided that a funding agreement is awarded to the offeror as a result of or in connection with the submission of this data, the Government shall have the right to duplicate, use or disclose the data to the extent provided in the funding agreement and pursuant to applicable law. This restriction does not limit the Government's right to use information contained in the data if it is obtained from another source without restriction. The data subject to this restriction are contained in pages _____ of this proposal.

Guidelines for Completing STTR Cover Sheet

Complete Cover Sheet Form electronically.

1. Proposal Number: This number does not change. The proposal number consists of the program year (i.e. 04) and unique four-digit system-generated number.
2. Research Topic: NASA research topic number and title (Section 9).
3. Proposal Title: A brief, descriptive title, avoid words like "development of" and "study of," and do not use acronyms or trade names.
4. Small Business Concern: Full name and address of the company submitting the proposal. If a joint venture, list the company chosen to negotiate and receive contracts. If the name exceeds 40 keystrokes, please abbreviate.

Research Institution: Full name and address of the research institute.

Mailing Address:	Must Match CCR Address. Address where mail is received
City, State, Zip:	City, 2-letter State designation (i.e. TX for Texas), 9-digit Zip code (i.e. 20705-3106)
Phone, Fax:	Number including area code
EIN/TAX ID:	Employer Identification Number/Taxpayer ID
DUNS + 4:	9-digit Data Universal Number System plus a 4-digit suffix given by parent concern
CAGE Code:	Commercial Government and Entity Code (Issued by Central Contractor Registration (CCR))

5. Amount Requested: Proposal amount from Budget Summary. The amount requested should not exceed \$100,000 (see Sections 1.4.1, 5.1.1).
Duration: Proposed duration in months. The requested duration should not exceed 12 months (see Sections 1.4.1, 5.1.1).
6. Certifications: Answer Yes or No as applicable for 6a, 6b, 6c, 6d, 6e, 6f, 6g, 6h, 6i, 6k, 6n (see Section 2 for definitions). Where applicable, SBCs should make sure that their certifications on Form A agree with the content of their technical proposal.
 - 6j. Cooperative Agreement signed by the SBC and RI: By answering yes, the SBC/RI certifies that a Cooperative Agreement signed by both SBC and RI is enclosed in the proposal (see Sections 3.2.2, 3.2.5).
 - 6l. Subcontracts/consultants proposed? By answering yes, the SBC/RI certifies that subcontracts/consultants have been proposed and arrangements have been made to perform on the contract, if awarded.
 - i) If yes, limits on subcontracting and consultants met: By answering yes, the SBC/RI certifies that business arrangements with other entities or individuals do not exceed 30 percent of the work (amount requested including cost sharing if any, less fee, if any) and is in compliance with Section 3.2.4, Part 9.
 - 6m. Government furnished equipment required? By answering yes, the SBC/RI certifies that unique, one-of-a-kind Government Furnished Facilities or Government Furnished Equipment are required to perform the proposed activities (see Sections 3.2.4 Part 8, 3.3.4 Part 8, 5.15). By answering no, the SBC/RI certifies that no such Government Furnished Facilities or Government Furnished Equipment are required to perform the proposed activities.
 - i) If yes, signed statement enclosed in Part 8: By answering yes, the SBC/RI certifies that a statement describing the uniqueness of the facility and its availability to the offeror at specified times, signed by the appropriate Government official, is enclosed in the proposal.
 - ii) If yes, non-SBIR funding source identified in Part 8. By answering yes, the SBC certifies that it has confirmed, non-SBIR funding source for whatever charges may be incurred when utilizing the required Government facility.
 - 6p. SBCs should choose "No" to confirm that work under this project has not been funded under any other Federal grant, contract or subcontract.
 - 6q. Offerors are responsible for ensuring compliance with export control and International Traffic in Arms (ITAR) regulations. All employees who will work on this contract must be eligible under these regulations or the offeror must have in place a valid export license or technical assistance agreement. Violations of these regulations can result in criminal or civil penalties.

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7. ACN Name, Telephone Number and E-mail: Name, telephone number and e-mail address of Authorized Contract Negotiator.
8. Proposals submitted in response to this Solicitation must be jointly developed by the SBC and the RI, and at least **40 percent** of the work (amount requested including cost sharing, less fee, if any) is to be performed by the SBC as the prime contractor, and at least **30 percent** of the work is to be performed by the RI (see Section 3.2.4).
9. Endorsement of this form certifies understanding of this statement.
10. Endorsements: An official of the firm must electronically endorse the proposal cover.