

Application for Federal Assistance SF-424

Version 02

* 1. Type of Submission: <input type="radio"/> Preapplication <input checked="" type="radio"/> Application <input type="radio"/> Changed/Corrected Application		* 2. Type of Application: <input checked="" type="radio"/> New <input type="radio"/> Continuation <input type="radio"/> Revision		* If Revision, select appropriate letter(s): <input type="text"/> * Other (Specify) <input type="text"/>
* 3. Date Received: 04/16/2007		4. Applicant Identifier: <input type="text"/>		
5a. Federal Entity Identifier: <input type="text"/>		5b. Federal Award Identifier: <input type="text"/>		
State Use Only:				
6. Date Received by State: <input type="text"/>		7. State Application Identifier: <input type="text"/>		
8. APPLICANT INFORMATION:				
* a. Legal Name: University of Pittsburgh				
* b. Employer/Taxpayer Identification Number (EIN/TIN): (b)(4)		* c. Organizational DUNS: 004514360		
d. Address:				
* Street1: 139 University Place				
* Street2: 350 Thackeray Hall				
* City: Pittsburgh				
* County: Allegheny				
* State: PA: Pennsylvania				
* Province: <input type="text"/>				
* Country: USA: UNITED STATES				
* Zip / Postal Code: 15260				
e. Organizational Unit:				
Department Name: Office of Research		Division Name: <input type="text"/>		
f. Name and contact information of person to be contacted on matters involving this application:				
Prefix: Miss		* First Name: Heide		
Middle Name: <input type="text"/>				
* Last Name: Eash				
Suffix: <input type="text"/>				
Title: Grants and Contracts Officer				
Organizational Affiliation: University of Pittsburgh				
* Telephone Number: 412-624-7400		* Fax Number: 412-624-7409		
* Email: offres@offres.pitt.edu				

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9. Type of Applicant 1: Select Applicant Type:

☒ Other (specify)

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

Private Nonprofit State-related

* 10. Name of Federal Agency:

U.S. Nuclear Regulatory Commission

11. Catalog of Federal Domestic Assistance Number:

77.006

CFDA Title:

U.S. Nuclear Regulatory Commission Nuclear Education Grant Program

* 12. Funding Opportunity Number:

HR-FN207-EDU1

* Title:

U.S. Nuclear Regulatory Commission Nuclear Education Grant Program

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Pittsburgh, Allegheny, Pennsylvania

* 15. Descriptive Title of Applicant's Project:

Graduate Certificate Program in Nuclear Power Engineering

Attach supporting documents as specified in agency instructions:

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16. Congressional Districts Of:

* a. Applicant: PA-014

* b. Program/Project: PA-014

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date: 09/01/2007

* b. End Date: 08/31/2010

18. Estimated Funding (\$):

* a. Federal	594,977.00
* b. Applicant	0.00
* c. State	0.00
* d. Local	0.00
* e. Other	0.00
* f. Program Income	0.00
* g. TOTAL	594,977.00

* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

- ☐ a. This application was made available to the State under the Executive Order 12372 Process for review on
- ☒ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ☐ c. Program is not covered by E.O. 12372.

* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

- ☐ Yes ☒ No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties: (U.S. Code, Title 218, Section 1001)

☒ ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mr. * First Name: Allen

Middle Name: A

* Last Name: DiPalma

Suffix:

* Title: Director, Office of Research

* Telephone Number: 412-624-7400 Fax Number: 412-624-7409

* Email: offres@offres.pitt.edu

* Signature of Authorized Representative: Allen DiPalma * Date Signed: 04/16/2007

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Standard Form 424 (Revised 10/2005)
Prescribed by OMB Circular A-102

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*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.