

AWARDEE ORGANIZATION AND MANAGEMENT SUMMARY
PART I
1. Common Name of Organization:
2a. Employer Identification Number (EIN):
2b. DUNS Number: 2c. NSF Awardee Organization Code: (If known)
3. Legal Name of Organization (if different):
4. Mailing Address:
City:
State:
Zip:
5. Names of Affiliated Organizations (if any):
6. Former Name of Organization (if any):
7. Type of Organization (select all that apply): (If For-Profit, check appropriate boxes):
State/Local Government or Agency <input type="checkbox"/>
Educational Institution <input type="checkbox"/>
Small Business <input type="checkbox"/>
Tribal Government <input type="checkbox"/>
Non-Profit <input type="checkbox"/>
Minority Business <input type="checkbox"/>
Hospital/Health Care Facility <input type="checkbox"/>
For-Profit (Commercial) <input type="checkbox"/>
Other (Please Identify):



8. Awardee Organization:	
a. President/Chief Executive Officer:	
Name:	
Title:	
Email:	
Phone:	
b. Award Notification Addressee:	
Name:	
Title:	
Email:	
Phone:	
9. Remarks:	

PART II (For NSF Use Only)	
10. NSF Institution Code:	
11. Organization appears to have the management and financial capabilities to administer NSF awards: <input type="checkbox"/> Yes <input type="checkbox"/> No	
12. Grants and Agreements Specialist Signature:	Date: