**PHS OTHER SUPPORT**

**For All Application Types – DO NOT SUBMIT UNLESS REQUESTED**

*There is no "form page" for reporting Other Support. Information on Other Support should be provided in the format shown below.*

\*Name of Individual:

Commons ID:

Persistent Identifier of the Senior/Key Person (PID):

**Other Support – Project/Proposal**

\*Title:

\*Major Goals:

\*Status of Support:

Project Number:

Name of PD/PI:

\*Source of Support:

\*Primary Place of Performance:

Project/Proposal Start and End Date: (MM/YYYY) (if available):

\* Total Award Amount (including Indirect Costs):

\* Person Months (Calendar/Academic/Summer) per budget period.

| Year (YYYY) | Person Months (##.##) |
| --- | --- |
| 1. [enter year 1] |  |
| 2. [enter year 2] |  |
| 3. [enter year 3] |  |
| 4. [enter year 4] |  |
| 5. [enter year 5] |  |

**IN-KIND**

\*Summary of In-Kind Contribution:

\*Status of Support:

\*Primary Place of Performance:

Project/Proposal Start and End Date (MM/YYYY) (if available):

\*Person Months (Calendar/Academic/Summer) per budget period

|  |  |
| --- | --- |
| Year (YYYY) | Person Months (##.##) |
| 1. [enter year 1] |  |
| 2. [enter year 2] |  |
| 3. [enter year 3] |  |
| 4. [enter year 4] |  |
| 5. [enter year 5] |  |

\*Estimated Dollar Value of In-Kind Information:

**\*Overlap** (summarized for each individual):

**\*Certification:**

When the individual signs the certification on behalf of themselves, they are certifying that the information is true, accurate, and complete.  This includes, but is not limited to, information related to current, pending, and other support (both foreign and domestic). Misrepresentations and/or omissions may be subject to prosecution and liability pursuant to, but not limited to, 18 U.S.C. §§ 287, 1001, 1031 and 31 U.S.C. §§ 3729-3733 and 3802.

**Signature:**

**Date:**