FIGURE 1: Cover Sheet

Wisconsin Highway Research Program

Project Title

Wisconsin Highway Research Program
LIMITED USE DOCUMENT

This proposal is for use of the recipient in selection of a research agency to conduct work under the Wisconsin Highway Research Program. If the proposal is unsuccessful, it should be destroyed. Proposals are regarded as fully privileged, and dissemination of the information included therein must be approved by WHRP.

Agency Name
Date

FIGURE 2: Summary Page

Project Title:

Proposing Agency: (Use name that will appear on contract include address and telephone number)

Person Submitting the Proposal: **(**Name and Title)

Proposal Written By: (Name and Title)

Proposal Date:

Principal Investigator: (Name and title, address, telephone number, and email address)

Administrative Officer: (Name and title, address, telephone number, and email address)

Proposed Contract Period: (In months)

Total Contract Amount:

Indirect Cost Portion at ____%

Technical Oversight Committee (TOC) Member Disclosure*:*
(Please disclose the name(s) and employer(s) of any WHRP TOC members who are part of the proposing team. If no TOC members are part of your team, please simply indicate *None*.)