

ELECTRONIC EPASS

DRAFT DEPARTMENTAL SUPPLEMENTARY INSTRUCTIONS

- **OCGA maintains UCLA's official instructions for completing the e-EPASS**
 - **This document compliments the OCGA official instructions by providing SEMEL Institute specific procedures and information**
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A. e-EPASS SYSTEM OVERVIEW

The electronic EPASS (*Extramural Proposal Approval & Submission Summary*) is an online system designed to facilitate EPASS creation and electronic routing, for internal departmental approval. The system is maintained by the Office of Research Administration (ORA). All SEMEL Institute EPASS forms are created and approved using the electronic system effective May 21, 2021.

B. REQUESTING SYSTEM ACCESS

New Preparers/Administrators/PIs within the SEMEL Institute will need to be added to the EPASS system to create/approve EPASSes. To request access to the system, email the OROS Pre-Award Team at preaward@mednet.ucla.edu.

- Full Name
- Email Address
- University ID # (9-digit)
- Center/Division and Name of Center/Division Director
- Setup can take 1-3 days.

You can also fill out a request form through the OROS website <https://oros.semel.ucla.edu/access-request-multi-forms/>

C. SYSTEM FORMATTING AND DATA ENTRY

- Data entry in EPASS will automatically log users out after 1 hour of inactivity. **Remember to SAVE!**
- Text entered in fields should not be all caps. Use **Title Case capitalization** <https://apastyle.apa.org/style-grammar-guidelines/capitalization/title-case>
- Files uploaded into the system should be:
 - File Type: .csv, .xls, .xlsx, .doc, .docx, .ppt, .pptx, .pdf, .txt
 - File Size: Cannot exceed 25MB

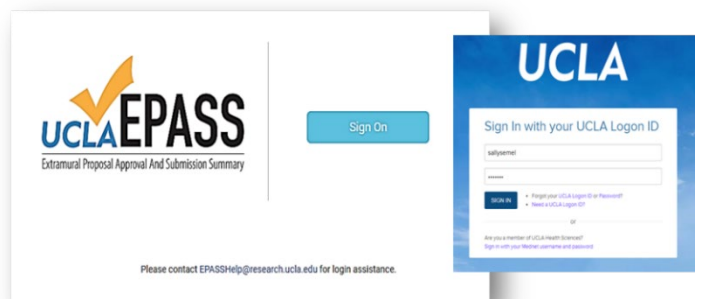
D. LOGGING INTO THE SYSTEM

Navigate to

<https://epass.research.ucla.edu/Account/Login>

Then sign in with your UCLA Logon ID

If you cannot login, refer to “Requesting System Access” instructions above.



E. CREATING A NEW EPASS

<p>1. To create a new EPASS, click “New Proposal” at the top of the landing page</p>	
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<p>2. A “New Proposal” prompt will appear</p> <p>3. Select the name of the PI from the dropdown.</p> <ol style="list-style-type: none"> If there are multiple PIs, enter the name of the “Contact” or “Administrative PI” here If the PI does not appear in the drop down menu, click on here to add If the person you want to add is in UC Path, please ask preaward@mednet.ucla.edu to add. If you know the person is not yet in UC Path, enter them manually and obtain their signature via PDF, outside of the system. <p>4. Are you submitting a Preliminary Proposal?</p> <p>5. Enter the Sponsor Due Date and Time</p> <ol style="list-style-type: none"> For Subawards enter sub’s due date, not the Prime Sponsor’s due date <p>6. Enter Deadline Type</p> <p>7. Your name should automatically appear as the preparer. If it does not, search for your name from the dropdown</p> <p>8. Once information is complete, click “Start” and complete all data fields within each of the 10 tabs</p>	<h3>New Proposal</h3> <p>PI</p> <p>Select PI ...</p> <p>(Contact your department's EPASS Admin if the PI is not in the list. Click here for a list of Admins)</p> <hr/> <p>Are you submitting a Preliminary Proposal (Letter of Intent/White Paper/Step-1 (NASA))?</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>Due Date <input type="text"/> Time (Pacific) <input type="text"/></p> <p>Deadline Type</p> <p>Select deadline type: <input type="text"/></p> <p>Preparer</p> <p>Sharinger, Judy</p> <p>PI</p> <p>Admins</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Email</th> <th>Program(s)</th> </tr> </thead> <tbody> <tr> <td>ELIZABETH Lizaola Gillespie</td> <td>elizaola@mednet.ucla.edu</td> <td>All</td> </tr> <tr> <td>Judy Sharinger</td> <td>JSharinger@mednet.ucla.edu</td> <td>All</td> </tr> <tr> <td>LAUREN Colleen KAWAGUCHI</td> <td>LKAWA@MEDNET.UCLA.EDU</td> <td>All</td> </tr> <tr> <td>ANNA MAY-LING LAU</td> <td>AMLau@mednet.ucla.edu</td> <td>All</td> </tr> </tbody> </table> <p>(Click here to manually enter the PI)</p> <p>(Click here to go back and select from the PI list)</p>	Name	Email	Program(s)	ELIZABETH Lizaola Gillespie	elizaola@mednet.ucla.edu	All	Judy Sharinger	JSharinger@mednet.ucla.edu	All	LAUREN Colleen KAWAGUCHI	LKAWA@MEDNET.UCLA.EDU	All	ANNA MAY-LING LAU	AMLau@mednet.ucla.edu	All
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ANNA MAY-LING LAU	AMLau@mednet.ucla.edu	All														

F. COMPLETING THE EPASS BY TAB


The EPASS is organized into 10 tabs to complete data entry. OCGA’s EPASS instructions are available within the EPASS system for assistance with definitions. The following pages of this guide provide SEMEL Department specific information to help complete the EPASS.



1. INVESTIGATORS TAB

- a. The PI will pre-populate from the information provided under “New Proposal”
- b. Select Co-PI/Multiple PIs, if applicable
Do not include Co-Investigators here
- c. If Co-PI is a current UCLA employee their name should be available as a dropdown option regardless of department affiliation.
- d. If the person you want to add is in UC Path, please ask preaward@mednet.ucla.edu to add.
- e. If you know the person is not yet in UC Path, enter them manually and obtain their signature via PDF, outside of the system.
- f. If Co-PI is not available from the dropdown menu, email preaward@mednet.ucla.edu to add/edit Co-PI information.
- g. If you know the person is not yet in UC Path, enter them manually and obtain their signature via PDF, outside of the system.
- h. Select Fellow (if Individual Fellowship) Sponsor/mentor should be listed as PI.
- i. If Fellow is not available from the dropdown menu, email preaward@mednet.ucla.edu to add/edit Fellow information.
- j. If you know the person is not yet in UC Path, enter them manually and obtain their signature via PDF, outside of the system.
- k. Select Save and Next button.

Principal Investigators

EPASS Instructions 

PI: CONGDON, ELIZA

Investigators

Department

Proposal

Types

Sponsor

Checklist

PI

CONGDON, ELIZA - 303748513 - Neurobehavioral Genetics  

(Contact your department's EPASS Admin if the PI is not in the list. [Click here for a list of Admins](#))

Co-PI/Multiple PI

Select Co-PI... 

Delete Co-PI

(Click [here](#) if PI is not in the list)

+ Add Co-PI

Fellow

Select Fellow... 

(Contact your department's EPASS Admin if the Fellow is not in the list. [Click here for a list of Admins](#))

Save

Save and next

2. DEPARTMENT TAB

1. Select “Yes” only if proposal is an NIH application and will be submitted by one of the SEMEL Institute DRA’s listed below.

- Elizabeth Gillespie
- Erika Mejia
- Margaret Chu

2. Select “Yes” only for awards received without proposal (i.e. proposal was submitted without UCLA approval, therefore there is not a proposal in the system to match to the award.)

3. Department: Select **SEMEL INSTITUTE (2000)**

4. Account Number:
441587 if proposal type is research
431587 if proposal type is training
621587 if proposal type is service

5. Enter Cost Center:
If unknown reach out to SEMEL Institute **Fund Manager**
<https://oes.semel.ucla.edu/pi-assignments/>

6. **Enter Recharge ID:** If unknown reach out to SEMEL Institute Finance Fund Manager. If Finance Fund Manager is unknown, reach out to Associate Director Julie Schaefer
Jschaef@mednet.ucla.edu

7. Person to contact with questions about this Proposal:
Enter the name of the person conducting the department pre-review. The individual listed here will be included in OCGA Proposal assignment and comments along with the EPASS preparer (you) and the PI.

8. Select Not applicable, unless services were used to develop the proposal.

Department or Organized Research Unit (ORU) EPASS Instructions

PI: CONGDON, ELIZA

[Investigators](#) [Department](#) [Proposal](#) [Types](#) [Sponsor](#) [Checklist](#) [Forms](#) [Funds](#) [Attachments](#) [Review](#) [Log](#)

Your changes have been saved.

Will this proposal be submitted by a Departmental Research Associate (DRA)?

Yes No

Is this EPASS being created for an award that has already been received? Do not mark 'Yes' if this proposal requires a submission to the sponsor.

Yes No

Administering Department

SEMEL INSTITUTE (2000)

Recharge ID

XXXX

Account Number

441587

Cost Center

XX

[+ Add Account Number/Cost Center](#)

Who can Central Administration contact with questions about this proposal and/or the resulting award?

KLEIN, SARAH A

Contact Work Phone Number

(310) 825-7167

Contact Email

sarahklein@mednet.ucla.edu

Departmental Pre-Award Email

Preaward@mednet.ucla.edu

Departmental Post-Award Email

Postaward@mednet.ucla.edu

Note: If these email addresses need to be updated, please ask your EPASS Admin to contact EPASSHelp@research.ucla.edu

Have the services of any campus center or ORU been used in the development of this Proposal? If Yes, select:

Not Applicable

If Other Center/Institute is selected, please specify name, or if multiple Center(s)/Institute(s), please add additional selection(s) here:

3. PROPOSAL TAB

1. Enter the Title as it appears on the proposal
Do not use all caps
2. Project Begin and End Dates will populate from the New Proposal Section.
3. Enter Save and Next.

Proposal Identification

EPASS Instructions 

PI: WELLS, KENNETH B

Investigators Department **Proposal** Types Sponsor Checklist Forms Funds

Proposal Title

Test

Project Begin Date

1/1/2025

Project End Date

12/31/2030

4. TYPES TAB

1. Use the OCGA EPASS Instructions for Award Type, Proposal Type and Special Program Type definitions
2. If applicable, select existing Award.
3. If EPASS action is related to an existing award, provide **UCLA PATS Number** in current Sponsor Award ID# section.
4. Select Save and Next.

Award / Proposal / Program Type

EPASS Instructions 

PI: CONGDON, ELIZA

Investigators Department Proposal **Types** Sponsor Checklist Forms Funds

Special Program Type

Select a special program type:

Award Type

Select an award type:

Proposal Type

Select a proposal type:

Program Type

Select a program type:

If this EPASS relates to an existing Award or Master Agreement, select an Action Type:

Select an action type:

Current Sponsor Award/ID #

Save and previous

Save

Save and next

5. SPONSOR TAB

1. Select the name of the entity to which UCLA is submitting the Proposal.
2. Enter Contact information.
3. Enter the URL for the Sponsor website. (not the link to the guidelines) This information is not required.
4. The Due Date, Time and Deadline Type are pre-populated from New Proposal Section.
5. If "Yes", the Upload Sponsor Guidelines section appears.
 - a. Select the document to upload. Description describes the attachment.
Suggested Typing: Guidelines#
Example for NIH R01 Using Parent FOA:
"Guidelines_PA-20-185"
6. Enter the Policy Name or GUIDELINES FOA# into the Name/Number text box. This information will appear on the EPASS.

Sponsor Information EPASS Instructions

PI: Gillespie, ELIZABETH Lizaola

Investigators Department Proposal Types **Sponsor** Checklist Forms Funds

Sponsor Information *(entity which will provide funding directly to UCLA)*

Select a sponsor

NIH - National Institutes of Health

[\(Click here if sponsor is not in the list\)](#)

Contact *(if known)*

Email Address

Phone Number

URL

Sponsor Due Date

5/1/2021

Time (Pacific)

2:00pm

Deadline Type

Electronic

Sponsor Guidelines and/or FOA/RFA/RFP:

Yes No

Upload Sponsor Guidelines

File Type: .csv,.xls,.xlsx,.doc,.docx,.ppt,.pptx,.pdf,.txt.
The individual file sizes cannot exceed 25 MB.

File

No file chosen

Description

Name/Number

7. When UCLA is a Subrecipient, the same information is required for the Prime Sponsor, as for the Sponsor.

Prime Sponsor Information *(Complete this section when UCLA is a subrecipient)*

Select a prime sponsor

Select a prime sponsor ...

[\(Click here if prime sponsor is not in the list\)](#)

Contact *(if known)*

Email Address

Phone Number

URL for Prime Sponsor Homepage

Prime Sponsor Due Date

Time (Pacific)

Prime Sponsor Guidelines and/or FOA/RFA/RFP:

Yes No

Name/Number

6. CHECKLIST TAB

1. PI Exception: SEMEL Institute faculty may not appear in search correctly. Double check eligible title code against this list https://oes.semel.ucla.edu/wp-content/uploads/2021/03/PDF_5_Academic_Se_nate_Titles_v11_2020.pdf
2. Off Campus: Select “yes” only if SEMEL Institute faculty are in a building not owned by UCLA.
3. If there are Outgoing Agreements to be issued under this proposal (i.e. subaward), select “Yes”.
4. If the project involves activities outside the US and/or partnership with foreign collaborators, select “Yes”.
5. If cost sharing is part of this proposal, select “Yes”. Estimate the value of the proposed cost share on the internal budget
6. If Unfunded Effort is proposed, select “Yes”

7. If you anticipate program income, select “Yes”.
8. If there are Human Subjects, select “Yes”
 - a. **Do not include IRB #** at proposal stage. Instead select “pending” or if applicable, “delayed onset”
9. If the Clinical Trial will use UCLA Health System resources, select “Yes”. Health System Resources are facilities that provide services to both clinical patients and research participants. Common HS Resources:
 - Radiology
 - Pharmacy
 - Pathology
 - CTSC/groups under the CTSI umbrella
 - Nuclear Medicine
 - Ronald Reagan Medical Center for inpatient
 - Stem Cell
10. If there are Animal Subjects, select “Yes”
 - a. **Do not include ARC #** at proposal stage. Instead select “pending” or if applicable, “delayed onset”

Proposal Checklist EPASS Instructions

PI: Gillespie, ELIZABETH Lizaola

Investigators Department Proposal Types Sponsor **Checklist** Forms Funds Attachments Review Log

PI Exception Required? (Check Requirements and Look up Eligibility). If yes, attach approval form (Sample Approval Form).

Yes No

On campus space?

Yes No

Building:

Select Building

If other:

Room:

Off campus space?

Yes No

Location:

Outgoing Agreements? If yes, attach Sub-recipient Commitment Form(s) or FDP Expanded Clearinghouse Subrecipient Letter(s) of Intent for each entity. PI signature indicates review and approval of the cost reasonableness of subrecipients' budgets. (See Outgoing Subawards Overview).

Yes No

Does this project involve activities outside the U.S. and/or partnership with foreign collaborators, whether or not funded?

Yes No

Is any mandatory Cost Sharing/Matching proposed in this application? (Cash, unfunded effort, or in-kind contributions - do not include salary cap differential.)

Yes No Voluntary cost share is discouraged under UC Policy.

Is any unfunded effort proposed in this application? In accordance with UC Policy, "unfunded effort", must be reported in ERS. (Do not include salary cap differential here.)

Yes No

Do you anticipate program income?

Yes No

Specify Source:

Estimated Amount:

Human subjects?

Yes No

If yes, indicate IRB #/Exception # or Pending Status:

IRB # or Exception #: Pending Delayed onset

NIH-funded Clinical Trial? If yes, investigators and staff involved in the conduct, oversight, or management of clinical trials should be trained in Good Clinical Practice. Training is available through CITI Program. Additional information about NIH-funded Clinical Trials can be found on the NIH website.

Yes No

Will the clinical research study utilize UCLA Health System resources, including but not limited to, any patient care costs? If yes, then a Policy 915 Coverage Analysis is required (contact coverageanalysis@mednet.ucla.edu).

Yes No

Animal subjects?

Yes No

If yes, indicate ARC # or Pending Status:

ARC #: Pending Delayed Onset

Use of radiation in humans and/or animals?

Yes No

If yes, indicate "Pending", MRSC/RDRC# and/or RUA#:

Pending MRSC/RDRC#: RUA#:

Human Embryonic Stem Cell Research? If yes, refer to the Stem Cell Policy and Procedures.

Yes No

Non-UCLA materials/equipment to be used?

Yes No

If yes, indicate type:

Source:

Human or primate cells, tissue, or fluids; recombinant or synthetic nucleic acids; potentially infectious materials; exotic plants or plant pathogens; select agents or toxins? For more information, see IBC website.

Yes No


<p>11. If using radiation, select “Yes”.</p> <p>12. If using Human Embryonic Stem Cells, select “Yes”.</p> <p>13. If Non/UCLA materials/equipment will be used, select “Yes”.</p> <p>14. If cells, tissues, fluids, etc. will be used, select “Yes”.</p> <p>15. If UC Intellectual Property will be used, select “Yes”.</p> <p>16. Answer the Export Control questions.</p>	<p>Use of UC Intellectual Property?</p> <p><input type="radio"/> Yes <input type="radio"/> No If yes, specify the case number: <input type="text"/></p> <hr/> <p>Export Control (see RPC Website) – Does the project involve the following:</p> <p>Shipping or carrying any tangible object or item to a foreign country?</p> <p><input type="radio"/> Yes <input type="radio"/> No If yes, specify: <input type="text"/></p> <p>Conducting research or other activities in, taking money to, or planning to have money transferred to a foreign country?</p> <p><input type="radio"/> Yes <input type="radio"/> No If yes, specify: <input type="text"/></p> <p>Training foreign persons in using equipment, technology, or technical data?</p> <p><input type="radio"/> Yes <input type="radio"/> No If yes, specify: <input type="text"/></p> <p>Traveling to or doing research in a country currently under a US Trade or Economic Embargo (see OFAC website)?</p> <p><input type="radio"/> Yes <input type="radio"/> No If yes, specify: <input type="text"/></p> <hr/> <p><input type="button" value="Save and previous"/> <input type="button" value="Save"/> <input type="button" value="Save and next"/></p>
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6.a OUTGOING SUBAWARDS TAB (If Outgoing Agreements was marked Yes)


<p>Subawards (“Outgoing”)</p> <p>1. Select a Subrecipient.</p> <p>2. Enter the name of the Subrecipient PI.</p> <p>3. Enter the Subrecipient Contact.</p> <p>4. Attach the appropriate Subrecipient documents.</p>	<p>Subawards <small>EPASS Instructions</small></p> <p>Investigators Department Proposal Types Sponsor Checklist Subawards Forms Funds Attachments Review Log</p> <p>REMINDER: For S2S Grants (Cayuse) proposals, please contact eRAHelp@research.ucla.edu if any information in a subrecipient’s Institutional Profile needs to be updated.</p> <p style="text-align: right;">+ Add Subaward</p> <p>Subrecipient Subrecipient PI</p> <p>Select a subrecipient... <input type="text"/> (Click here if the subrecipient is not in the list)</p> <p>Subrecipient Central Administration Contact (email listed on Letter of Intent or Commitment Form)</p> <p><input type="text"/></p> <p>+ Attach Letter of Intent (LOI)</p> <p>+ Attach Scope of Work</p> <p>+ Attach Budget</p> <p>+ Attach IDC Rate Agreement</p>
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<p>5. Answer the questions regarding the proposed subaward.</p>	<p>Attachments</p> <table border="1"> <thead> <tr> <th>Type</th> <th>File</th> <th>Mark for deletion</th> </tr> </thead> <tbody> <tr> <td colspan="3">Does the proposed subaward involve any of the following?</td> </tr> <tr> <td>Human Subjects (IRB)?</td> <td>Embryonic Stem Cell Research Oversight (ESCRO)?</td> <td>Genomic Data Sharing?</td> </tr> <tr> <td><input type="radio"/> Yes <input type="radio"/> No</td> <td><input type="radio"/> Yes <input type="radio"/> No</td> <td><input type="radio"/> Yes <input type="radio"/> No</td> </tr> <tr> <td>Animal Subjects (ARC/IACUC)?</td> <td>Dual Use Research of Concern (DURC)?</td> <td></td> </tr> <tr> <td><input type="radio"/> Yes <input type="radio"/> No</td> <td><input type="radio"/> Yes <input type="radio"/> No</td> <td></td> </tr> </tbody> </table> <p><input type="button" value="Save and previous"/> <input type="button" value="Save"/> <input type="button" value="Save and next"/></p>	Type	File	Mark for deletion	Does the proposed subaward involve any of the following?			Human Subjects (IRB)?	Embryonic Stem Cell Research Oversight (ESCRO)?	Genomic Data Sharing?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	Animal Subjects (ARC/IACUC)?	Dual Use Research of Concern (DURC)?		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	
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Animal Subjects (ARC/IACUC)?	Dual Use Research of Concern (DURC)?																		
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No																		

7. FORMS TAB

<h3>Conflict of Interest Disclosures</h3> <ol style="list-style-type: none">Review OCGA provided hyperlinks for assistance.If Sponsor is a federal PHS entity or Sponsor has adopted PHS regulations, you will be prompted to enter the last completed eEDGE certification date for each key person.For all other federal non-government or industry Sponsors, upload the required COI document in the attachments tab.	<h3>Additional Forms Required</h3> <p>EPASS Instructions </p> <p>PI: Gillespie, ELIZABETH Lizaola</p> <p>Investigators Department Proposal Types Sponsor Checklist Forms Funds Attachments Review Log</p> <p>COI (Disclosure Requirements)</p> <p>Sponsor/Prime Sponsor is Federal Public Health Service (PHS) or agency that has adopted the PHS regulations? <input type="radio"/> Yes <input type="radio"/> No If yes, provide names of other investigators in Project Personnel below (See UCLA Policy 926.)</p> <p>Sponsor/Prime Sponsor is Federal (other than PHS), CIRM or special research programs managed by the UC Research Grants Program Office (RGPO)? <input type="radio"/> Yes <input type="radio"/> No If yes, attach in Attachments Section COI Form 740 & Supplement to Form 740 (if applicable). See UCLA Procedure 925.3.</p> <p>Non-Government Sponsor/Prime Sponsor? <input type="radio"/> Yes <input type="radio"/> No If yes and project is Research, attach in Attachments Section Form 700-U, 700-U Addendum and 700-U Supplement, as applicable, unless sponsor is exempt. See UCLA Procedure 925.2.</p> <p>Industry Sponsored Research</p> <p>Industry Sponsored Non-Clinical Proposal? <input type="radio"/> Yes <input type="radio"/> No If yes, attach Industry Sponsored Research Checklist.</p> <p>Industry Sponsored Clinical Trial? <input type="radio"/> Yes <input type="radio"/> No If yes, view the Clinical Trials Contract & Strategic Relations Checklist to determine additional required attachments.</p> <p>Save and previous Save Save and next</p>
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8. FUNDS TAB

<h3>1st Budget Period</h3> <ol style="list-style-type: none">Provide values for the 1st budget period:<ol style="list-style-type: none">Direct Costs (Included and Excluded)Excluded Direct CostsF&A CostsTotal Costs <h3>All Budget Periods</h3> <ol style="list-style-type: none">Provide amounts for the entire project period:<ol style="list-style-type: none">Direct Costs (Included and Excluded)Excluded Direct CostsF&A CostsTotal Costs <p>Values must be entered for 1.a. through 2.d. above. For example, if there are no excluded direct costs and/or F&A costs, enter "0"</p> <h3>F&A</h3> <ol style="list-style-type: none">Enter the applicable F&A rate<ol style="list-style-type: none">Do not use "%" character, enter value onlyIf not requesting F&A, enter "0"Select the applicable F&A Base Type<ol style="list-style-type: none">If F&A is "0" select "TDC"If there is more than one F&A rate, state so in the remarks section <p>Select Save and Next.</p>	<h3>Funds Requested</h3> <p>EPASS Instructions </p> <p>PI: Gillespie, ELIZABETH Lizaola</p> <p>Investigators Department Proposal Types Sponsor Checklist Forms Funds Attachments</p> <table><tr><td>1st Budget Period (If there is no budget associated to this project, please enter 0 for Direct Costs, Excluded Direct Costs, and F&A Costs)</td><td>All Budget Periods (complete or involved)</td></tr><tr><td>Direct Costs (\$)</td><td>Direct Costs (\$)</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>Excluded Direct Costs (\$)</td><td>Excluded Direct Costs (\$)</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>F&A Costs (\$)</td><td>F&A Costs (\$)</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>Total Costs (\$)</td><td>Total Costs (\$)</td></tr><tr><td><input type="text" value="0"/></td><td><input type="text" value="0"/></td></tr></table> <p>F&A:</p> <p>F&A Rate (%) - If more than one F&A Rate, explain in Remarks <input type="text"/></p> <p>F&A Base Type If Other, specify: Select F&A base type: <input type="text"/> <input type="text"/></p> <p>Save and previous Save Save and next</p>	1st Budget Period (If there is no budget associated to this project, please enter 0 for Direct Costs, Excluded Direct Costs, and F&A Costs)	All Budget Periods (complete or involved)	Direct Costs (\$)	Direct Costs (\$)	<input type="text"/>	<input type="text"/>	Excluded Direct Costs (\$)	Excluded Direct Costs (\$)	<input type="text"/>	<input type="text"/>	F&A Costs (\$)	F&A Costs (\$)	<input type="text"/>	<input type="text"/>	Total Costs (\$)	Total Costs (\$)	<input type="text" value="0"/>	<input type="text" value="0"/>
1st Budget Period (If there is no budget associated to this project, please enter 0 for Direct Costs, Excluded Direct Costs, and F&A Costs)	All Budget Periods (complete or involved)																		
Direct Costs (\$)	Direct Costs (\$)																		
<input type="text"/>	<input type="text"/>																		
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<input type="text"/>	<input type="text"/>																		
F&A Costs (\$)	F&A Costs (\$)																		
<input type="text"/>	<input type="text"/>																		
Total Costs (\$)	Total Costs (\$)																		
<input type="text" value="0"/>	<input type="text" value="0"/>																		

9. ATTACHMENTS TAB

REMARKS

1. Include any additional information that is important to communicate to OROS/OCGA for review of this proposal.

PROPOSAL ELECTRONIC SYSTEM

1. Select the appropriate applicable Proposal Electronic System (most common):
 - a. **S2S Grants (Cayuse)**
 - b. **Proposal Central**
 - c. **NIH ASSIST**
2. Enter the Proposal Identifier provided by the e-system to ensure the Proposal can be located for review. For S2S (Cayuse) proposals, enter the internal title.

Remarks / Attachments

EPASS Instructions 

PI: Gillespie, ELIZABETH Lizaola

Investigators Department Proposal Types Sponsor Checklist Forms Funds **Attachments**

- If more than one F&A Rate, explain in Remarks below.

Remarks (optional)

Maximum of 6 lines, 500 characters.

0/500 characters

Proposal Electronic System

How to Submit a Proposal to OCGA 

Electronic System

If Other, specify:

Proposal Identifier

Select electronic system:

ATTACHMENTS

1. Select "Type" of document from drop down menu.
 - a. Attach Proposal.
 - b. **COI type:** Upload 700U/Addendum, 740, as applicable.
 - c. **Sponsor Forms type:** upload proposal, if multiple files, merge into a single PDF. **Do not provide proposal, if available in E-System.**
 - d. **Other type:** Upload internal budget or any other document(s) important for OCGA review.
2. Provide file description. Keep simple, such as "internal budget, "sponsor guidelines"

ATTACH FILES BY PROPOSAL SUBMISSION:

1. **S2S Grants (Cayuse): No attachments required in EPASS system.** Upload all files in the "supporting documents" section of Cayuse
2. **All Other E-System Proposals: Upload internal forms per OROS Intent to Submit email (PI Exception, COI, internal budget, subrecipient forms.)**
3. **Proposals NOT submitted via e-system: Upload Proposal document and internal forms as applicable per OROS Intent to Submit email (PI Exception, COI, internal budget, subrecipient forms.)**

Upload Documents

[+ Attach Proposal](#)

[Click here to update Subaward Documents](#)

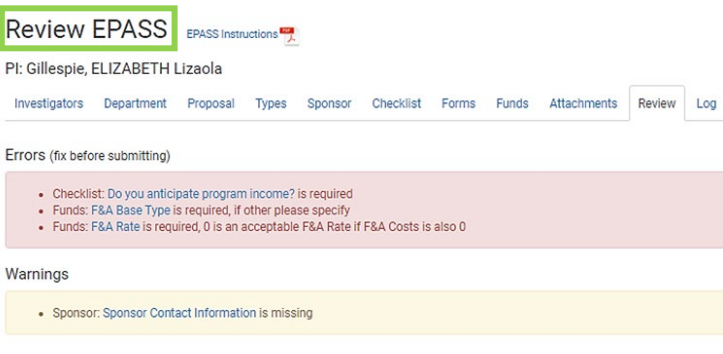
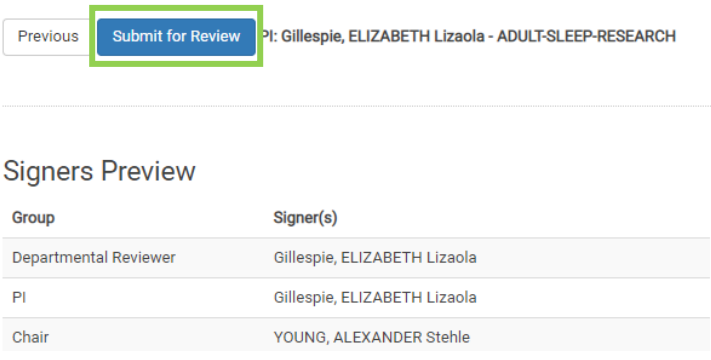
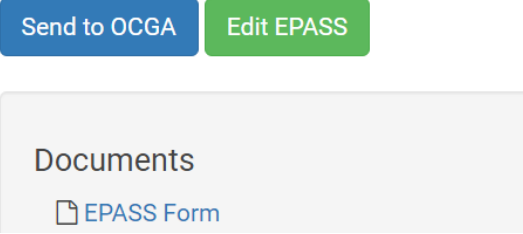
[+ Attach Other Documents](#)

Save and previous

Save

Save and next

10. REVIEW TAB

<p>SYSTEM REVIEW FOR ERRORS</p> <ol style="list-style-type: none"> 1. Click on the “Review” tab when all other tabs are complete. 2. The system will complete an automatic error check and display errors. 3. <u>Errors must be rectified prior to routing for approvals.</u> Warnings are OK. 4. Please keep in mind the system does not catch all errors so review your EPASS carefully. 	 <p>The screenshot shows the 'Review EPASS' page for PI: Gillespie, ELIZABETH Lizaola. It features a navigation menu with 'Review' highlighted. Under 'Errors (fix before submitting)', there are three items: 'Checklist: Do you anticipate program income? is required', 'Funds: F&A Base Type is required, if other please specify', and 'Funds: F&A Rate is required, 0 is an acceptable F&A Rate if F&A Costs is also 0'. Under 'Warnings', there is one item: 'Sponsor: Sponsor Contact Information is missing'.</p>								
<ol style="list-style-type: none"> 5. The completed EPASS may be reviewed and/or downloaded as a PDF. 									
<ol style="list-style-type: none"> 6. A “Submit for Review” button will become available once all errors are rectified. 7. “Submit for Review” initiates the electronic approval routing and initiates the OROS Pre-Award Review process. <ol style="list-style-type: none"> a. This function does not submit the EPASS/materials to OCGA for review. 8. The SEMEL Institute e-EPASS Review Process. Once Submit for Review is pushed, the Department Reviewer will receive an email and approve or deny. Once approved, an email will be sent to PI to approve or deny, followed by Department Chair. 9. When auto email is received by PI, they need to login using SSA unless they are already logged in, to review the EPASS. 	 <p>The screenshot shows the 'Submit for Review' button highlighted in green. Below it is a 'Signers Preview' table:</p> <table border="1"> <thead> <tr> <th>Group</th> <th>Signer(s)</th> </tr> </thead> <tbody> <tr> <td>Departmental Reviewer</td> <td>Gillespie, ELIZABETH Lizaola</td> </tr> <tr> <td>PI</td> <td>Gillespie, ELIZABETH Lizaola</td> </tr> <tr> <td>Chair</td> <td>YOUNG, ALEXANDER Stehle</td> </tr> </tbody> </table>	Group	Signer(s)	Departmental Reviewer	Gillespie, ELIZABETH Lizaola	PI	Gillespie, ELIZABETH Lizaola	Chair	YOUNG, ALEXANDER Stehle
Group	Signer(s)								
Departmental Reviewer	Gillespie, ELIZABETH Lizaola								
PI	Gillespie, ELIZABETH Lizaola								
Chair	YOUNG, ALEXANDER Stehle								
<p>PLEASE <u>DO NOT SEND</u> THE EPASS TO OCGA. THE REVIEWER WILL DO SO ONCE ANY COMMENTS ARE ADDRESSED.</p>	 <p>The screenshot shows two buttons: 'Send to OCGA' (blue) and 'Edit EPASS' (green). Below them is a 'Documents' section with a link to 'EPASS Form'.</p>								

- Once you submit the EPASS, please email preaward@mednet.ucla
- Once OROS routes the EPASS, you can still make edits to the EPASS
- Once the EPASS has been sent to OCGA, any further edits will need to be done manually via PDF, and emailed to OCGA