**Disclaimer:**

This form is to be filled out closely and collaboratively with the service provider. Forms completed without formal core service input will be declined. The core service should fill out their portion of this template and send it back to the applicant to upload with their application.

**Reminder:**

This form must be saved and uploaded as a **PDF** to the REDCap Spark Award Intake Form.

**Important Dates:**

All services must be completed no later than 7/31/2026 and all invoices must be received by 8/31/2026.

**Spark Applicant Name:**

**Spark Applicant Email Address:**

**Project Title:**

**The section below is to be answered by the service provider**

**Date of Completion:**

**Core Service Provider Department:**

**Core Service Email Address:**

**Core Service Personnel Who Completed the Cost Calculation table below**:

I confirm that we can complete these services by July 31, 2026

I confirm that we will submit all invoices by August 31, 2026

|  |  |  |
| --- | --- | --- |
| **Cost Calculation:** |  |  |
| Service Description: | Estimated Time (Hours): | Estimated Cost: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Total: |  |  |

For questions, please contact [CTSI-Spark@osumc.edu](mailto:CTSI-Spark@osumc.edu)