

# Quick Reference Guide for Grant Applications 2024-2025

The FY25 Kansas fiscal year is July 1, 2024 – June 30, 2025

## **Authorized University Grant Signatories:**

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## **Support, Proposal & Budget Review, Internal Approvals, Submission:**

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**Office of Scholarship and Sponsored Projects** <https://www.fhsu.edu/academic/gradschl/osspl/>

## **Grant Search Resources:**

**AASCU** - Must make an account using @fhsu.edu email  
<https://aascu.org/resources-expertise/grc/grc-resources/>

**SPIN** - Must use University IP address or VPN <https://spin.infoedglobal.com/Home/SOLRSearch>

## **Cover Sheet Information:**

**Legal name of Applicant:** Fort Hays State University

**Address:** 600 Park St. Hays, KS 67601-4099

**Telephone:** (785) 628-4000

**FAX:** (Admin & Fin.) (785) 628-4046

**FAX:** (Grants Office) (785) 628-4479

**US Congressional District:** 1st (KS-001)

**Legislative District:** 111th F

**EIN Number:** 48-1210777

**DUNS Number:** 07-627-4919

**UEI Number:** DVSMS2BMAK51

**Student labor & Tuition**

**Undergraduate Students: Wage = \$10.00/hr**

[www.fhsu.edu/humanresourceoffice/student-employment/](http://www.fhsu.edu/humanresourceoffice/student-employment/)

**Graduate Assistantships:**

<https://www.fhsu.edu/academic/gradschl/admission/graduate-assistantships/>

**Tuition Rates:**

[https://www.fhsu.edu/sfs/students\\_parents/tuition/](https://www.fhsu.edu/sfs/students_parents/tuition/)

**State of Kansas Travel & Subsistence Rates:**

**Lodging and Per Diem Rates:**

<https://www.fhsu.edu/bus-off/Expenses%20and%20Travel/>

**FHSU Mileage Reimbursement Rates:**

<https://www.fhsu.edu/administrative/physicalplant/motor-pool/>

**Federal Mileage Reimbursement Rates:**

<https://www.irs.gov/tax-professionals/standard-mileage-rates>

\*Travel outside the U.S. must be on an American carrier

**"Indirect Cost Rate" or "Facilities & Administrative (F&A)" or "Overhead Costs":**

“Indirect costs” refer to overhead charges for general support and management. This is a federally negotiated rate.

**On-campus Indirect cost rate:** 32.00% of salary + fringe

**Off-campus Indirect cost rate:** 14.00% of salary + fringe

**Fringe:** Salary x UPS (17.9370) + Insurance

**Health Insurance Rates**

GROUP HEALTH INSURANCE	EMPLOYER	EMPLOYER	TOTAL	ACCOUNT CODE
	SEMI-MONTHLY RATES	MEDICAL	DENTAL	
Full-Time Single Employee	\$373.11	\$20.05	\$393.16	519500
Part-Time Single Employee	\$298.60	\$20.39	\$318.99	519500
Full-Time Employee, Dependent	\$546.67	\$28.77	\$575.44	519500
	Coverage*			
Part-Time Employee, Dependent	\$435.03	\$28.00	\$463.03	519500
	Coverage*			
Full-Time Healthy Kids Dependent	\$581.14	\$28.77	\$609.91	519500
	Coverage			
Part-Time Healthy Kids Dependent	\$463.65	\$28.00	\$491.65	519500
	Coverage			

**Payroll Costs - Fringe Benefits (Less Health Insurance)**

**Classification:**

Unclassified Personnel - 17.9370%

USS Personnel - 20.9770%

Student Labor- 0.787%

Graduate Assistants- 0.787%

Student Summer - Not Enrolled- 8.437%