PI/PD Eligibility Request Form

INSTRUCTIONS FOR THE APPLICANT:

- ✓ **Review** the policy on Principal Investigator Eligibility on Sponsored Programs policy #900-006 prior to completing this form.

- ✓ **Collect** all the required signatures and provide the requested information.

- ✓ **Return** this application prior to beginning proposal work so that it is clear PI/PD or Co-PI/Co-PD eligibility has been approved. OSP may not be able to provide assistance until your request is approved.

- ✓ **Submit (WITH VITAE)** to the Office of Sponsored Programs email: osp@uccs.edu. Please allow 15 working days for review.

- ✓ **NOTE:** The completion of a PI eligibility form is not required when submitting applications for:
  - Mentored projects, such as mentored career development awards; or
  - Mentor/mentee type fellowship applications where the sponsor requires that the mentee conduct their research under the supervision of a designated faculty mentor/sponsor in the facilities of that designated mentor/sponsor and/or the sponsor requires supporting documentation from the mentor (e.g., CV, letter of support).

*NOTE: Unsigned and incomplete applications will be returned without review.

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A. APPLICATION INFORMATION:

Requests for approval to serve as:

Principal Investigator (PI) / Project Director (PD)

Co-Principal Investigator (Co-PI) / Co-Project Director (Co-PD)

on

any proposal submitted through
(if different from the home unit, signatures of both units are required)

OR

the following proposal only

Applicant's Appointment: 50% or higher   Other (give %)

Training and Experience: Provide examples certifying that the applicant has the necessary training, experience, and independence to 1) complete the sponsored projects and 2) administer the project. Please make sure to ***attach your vitae.***

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B. APPLICANT ELIGIBILITY SPONSOR

Name the individual who will provide appropriate oversight and mentoring to help ensure the project is successful and accept responsibility for the awarded project should the applicant leave the University of eligibility be revoked. <u>This person should already have PI approval</u>.

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C. APPLICANT SUPERVISION INFORMATION

Name the individual who will be the applicant's direct supervisor.

D. REQUESTING UNIT

Name the unit requesting eligibility/permission (if different from home department listed above):

Describe the resources, support, and oversight to be provided by the requesting unit, including financial monitoring support, which the applicant will receive:

Name the specific sponsored programs administrator who will provide financial monitoring (post-award) support:

Explain the circumstances why the applicant needs the eligibility/permission to be PI or Co-PI:

How will the duties and workload adjustments be modified to accommodate effort requirements?

E. APPLICANT ASSURANCES (Initial each item and sign)

_____ The information provided about my qualifications and experience is true, complete, and accurate,

_____ Any false, fictitious, or fraudulent statements or claims may place me at criminal, civil, or administrative penalties,

_____ I have not been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by a federal department or agency,

_____ I will uphold the roles and responsibilities of the PI/PD/Co-PI/Co-PD (Policy 900-001, Roles and Responsibilities for Sponsored Programs Administration

_____ I understand I must complete the required Principal and Co-Principal Investigator trainings indicated at the OSP Trainings webpage; and

_____ I have completed my annual conflict of interest disclosure.

Applicant Signature   Date

F. RECOMMENDATION/CERTIFICATIONS (to be obtained by the applicant)
All signatures must be obtained prior to submitting the request to OSP

By signing below, we recommend that the applicant be approved to serve as indicated and certify that the necessary facilities and other required resources will be available to the applicant through the completion of the sponsored program(s).

- The requesting unit takes full technical and financial responsibility.
- In the event this request is approved, the applicant's sponsor and the applicant's supervisor must complete certain training and will do so promptly when notified by OSPRI.
- In the event that the project is funded, the faculty sponsor is required to provide appropriate oversight and mentoring to help ensure the project is successful.
- In the event the applicant leaves the University of Colorado Colorado Springs or has their eligibility revoked prior to its completion, the Faculty Sponsor agrees to assume responsibility for the completion of the project.
- Any change in appointment required for the applicant to serve in this capacity, in accordance with Regent and/or CU Policy, will be made.

Applicant's Sponsor   Date

Applicant's Supervisor   Date

Chair, Requesting Unit   Date   Chair, Applicant Home Department, Date
                                                              if different

Dean, Center Director, or VC of   Date   Dean, Center Director or VC   Date
of Requesting Unit   of Home Unit, if different

Provost   Date
If Dean/Director is the faculty sponsor

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OFFICES OF SPONSORED PROGRAMS REVIEW

COMMENTS FROM OSP IF ANY:

Approved by Vice Provost for Research
Signature/Date