

University of Colorado Colorado Springs

Office of Sponsored Programs and Research Integrity (OSPRI)

REQUEST FOR INTRA-UNIVERSITY PRINCIPAL INVESTIGATOR (PI) or CO-PRINCIPAL INVESTIGATOR (CO-I) CHANGE

Preface:

This document is to be initiated by the departmental post-award individual when requesting a PI or Co-PI change within UCCS (e.g. from the current UCCS PI of record to a new UCCS PI of record). Before completing the below, please read: 1) the notice of award's terms & conditions 2) [2 CFR 200.308\(c\)\(1\) \(2\) \(3\)](#)

A. PROJECT INFORMATION:

Sponsor:

Grant/Contract # or Speedtype:

Project Title:

B. CURRENT PRINCIPAL INVESTIGATOR/CO-PRINCIPAL INVESTIGATOR INFORMATION (as awarded):

(attach additional information, if necessary)

Original Principal Investigator:

Name:

Phone:

Department:

Is this role changing? Yes No

Original Co-Principal Investigator (if applicable):

Name:

Phone:

Department:

Is this role changing? Yes No

Original Co-Principal Investigator (if applicable):

Name:

Phone:

Department:

Is this role changing? Yes No

C. PROPOSED PRINCIPAL INVESTIGATOR/CO-PRINCIPAL INVESTIGATOR INFORMATION:

(attach additional information, if necessary)

Principal Investigator:

Name:

Phone:

Department:

Title at UCCS:

Are they PI eligible?

No change in PI requested

Co-Principal Investigator (if applicable):

Name:

Phone:

Department:

Title at UCCS:

Are they PI eligible?

No change in Co-I requested

Co-Principal Investigator (if applicable):

Name:

Phone:

Department:

Title at UCCS:

Are they PI eligible?

No change in Co-I requested

D. REQUEST DETAILS:

1. Describe why the PI / Co-I change is being requested:
2. Describe why the PI / Co-I change is necessary:
3. Does the proposed individual(s) in section C have automatic PI / Co-I eligibility (refer to UCCS policy 900-006)?
4. Is this proposed individual currently involved with the project?
5. Requested effective date of this change:

E. STATUS:

1. Provide a brief description of the progress to date:
2. Description of work yet to be accomplished:
3. Provide a description of the work that will be the responsibility of this requested PI / Co-I:
4. If the primary PI is changing, indicate the speedtype that will pay for any unallowable costs or over expenditures:

F. CERTIFICATIONS – CURRENT (as awarded):

I certify the above information is correct:

PI signature

I agree with the proposed request and recommend approval:

Supervisor / Department Chair

I agree with the proposed request and recommend approval:

Dean/VC for Student Affairs/ VC for Administration
& Finance, if applicable

I agree with the proposed request and recommend approval:

Center/Institute Director, if applicable

G. CERTIFICATIONS – (when ADDING an individual):

I certify the above information is correct:

Proposed PI / Co-I signature

I agree with the proposed request and recommend approval:

Supervisor / Department Chair

I agree with the proposed request and recommend approval:

Dean/VC for Student Affairs/ VC for Administration
& Finance, if applicable

I agree with the proposed request and recommend approval:

Center/Institute Director, if applicable

H. CERTIFICATIONS – (when REMOVING an individual):

I certify the above information is correct:

To-be removed, PI / Co-I signature

I agree with the proposed request and recommend approval:

Supervisor / Department Chair

I agree with the proposed request and recommend approval:

Dean/VC for Student Affairs/ VC for Administration
& Finance, if applicable

I agree with the proposed request and recommend approval:

Center/Institute Director, if applicable

APPROVED

Associate Vice Chancellor for Research, or designee

Adobe Sign signature line for individual who routes this form (if not a signer above):

Signature of Adobe Sign Router