*Refer to UNC’s*  [*Investigator Eligibility Policy*](http://www.unco.edu/research/office-of-sponsored-programs/policies-procedures-and-forms/) *to determine your eligibility to serve as an investigator on an externally funded project. To request an exception to the policy, email this completed form to Office of Sponsored Programs (**osp@unco.edu**), with subject line “PI Eligibility.”*

*Identify (*✓*) your UNC affiliation in relation to this request and complete supplemental information as applicable:*

|  |  |  |  |
| --- | --- | --- | --- |
|  | *Onboarding  – Faculty or exempt staff (select one) – Start date:* |  | *Postdoc –Faculty mentor: –Unit:* |
|  | *Visiting or Affiliate faculty –Unit:*  |  | *Current UNC exempt staff –Title:* |
|  | *Retired/Separated UNC faculty or exempt staff – Separation date:*  |  | *Student  –Undergraduate or Graduate (select one)*  |

 *Provide information about the proposal or existing project for which you are requesting PI or Co-PI eligibility:*

|  |
| --- |
| **PROPOSAL** |
| Sponsor: |  |
| Funding program/RFP: |  |
| Your requested role: | *(PI or Co-PI)* |
|  *--If Co-PI, identify the PI:* |  *(Name, Title, Unit)* |
| Proposal due date: |  |
| Project duration: |  |
| Anticipated budget: |  |

|  |
| --- |
| **PROJECT** |
| Sponsor: |  |
| Project title: |  |
| Your requested role: | *(PI or Co-PI)* |
|  *--If Co-PI, identify the PI:* | *(Name, Title, Unit)* |
| Project end date: |  |

*Attach the following to every request:*

1. Current copy of requestor’s CV
2. Additional page(s) to justify requestor’s designation as PI or Co-PI. At minimum, describe the role and contribution to the merit of the project. Other relevant, supporting information may also be included.

# APPROVALS

1. **Applicant Certification:** I agree to serve as principal investigator or co-principal investigator (as indicated above), and I will comply with all applicable University of Northern Colorado policies and procedures and all sponsor requirements.

Signature Date

1. **UNC Recommendations**: I recommend the approval of the requested PI or Co-PI eligibility. By signing below, I accept responsibility, and agree that my unit will cover any costs that might be disallowed by the sponsor due to this individual’s involvement on or departure from the project.

Chair or Director Name Signature Date

Dean or Vice President Name Signature Date

1. ***FOR STUDENT REQUESTS ONLY:* UNC Faculty Recommendation**: I recommend the approval of the requested PI or Co-PI eligibility. I agree to be responsible for fiscal management of the award, and to assist the student and oversee other aspects of project conduct and administration.

Faculty PI Name Signature Date

1. **UNC Institutional Approval**: Based on the information provided in this request and the recommendations given above, I approve the requested PI or Co-PI eligibility. Should any circumstances change, this approval may be revoked at the discretion of the AVPR.

Assistant Vice President for Research (AVPR) Signature Date