TO: Director, Office of Sponsored Programs

FROM:      , Candidate to serve as PI or co-PI

DATE:

SUBJECT: Request to waive PI eligibility policy

Your consideration of this request to waive Syracuse University’s PI eligibility policy is requested. I ask to serve as PI or Co-PI on the following application:

|  |  |
| --- | --- |
| Project Title: | |
| Sponsor/source of funding: | |
| Administering Dept. or Center: | Proposal Due Date: |
| Other SU Faculty serving as PI or Co-PI: | |
| Email address for notification of approval: | |

**Rationale**

The rationale for my serving in this role is:      .

My current curriculum vita is attached.

My Annual Conflict of Interest (COI) is current.

**Experience**

I have prior experience as a PI.

I do not have prior experience as a PI.

* Recognizing that responsible management of sponsored projects is a learned skill, my college/school or unit will ensure that I will be mentored in the technical, administrative and financial management duties of a PI/PD by the following individuals:      .
* Specific details of our mentoring plan include (add additional sheets as necessary):

**PI/Co-PI Candidate Signature Date Please print name**

**College/School or Unit support to be provided:**

We confirm that the appropriate administrative and fiscal support staff and services will be available to support this individual.

We will ensure that these support personnel regularly attend OSP Coffee Breaks to ensure that they are also properly trained and aware of the evolving requirements for sponsored programs administration.

We understand that this request is specific to the above referenced application and complete requests to serve as a PI or Co-PI on other applications will be forwarded to the Vice President for Research for final determination.

Faculty Sponsor/MentorDate Please print name

Department Chair/Center DirectorDate Please print name

College Dean/Unit HeadDate Please print name

**APPROVAL:**

Director - OSP Date

VP for Research Date

NOTE: To facilitate review and approvals, those signing this form may also forward it as an attachment from their own SU email accounts to the next individual using the following chain-mail procedure:   
1.  Type your name and date in the appropriate space on the form attached to this email

2. Attach revised form to email.  In body of email, indicate:  
"I have read, acknowledge and certify all items presented on the attached Request to waive PI eligibility policy form applicable to my role as <role>."

The Dean or Unit head (or their designee with clear rights to the dean / unit head’s email account) should forward this form to staub@syr.edu.