

EARLY BIRD ACTION

Request To Open New Department Number

Reason for request: Pre-award costs Authorization to Proceed

Sponsoring Agency: _____

Agency award number: _____

Anticipated award period: Start date _____ End date _____

Project title: _____

Principal Investigator: _____

Department: _____

Estimated award amount: _____

Type of award: New Renewal Continuation Existing

Previous department number, if applicable: _____

How much funding are you requesting and why?

What information do you have to confirm your award (explain or attach)? _____

STATEMENT OF RESPONSIBILITY

We request that an advance department number be opened/accessed for the project described above. There is reasonable certainty that an award will be received from the identified agency with an effective date that will cover charges to be made to this number. If such an award is not received, the number(s) listed below will be used to cover any charges. THIS MUST BE A 122XXXX00 NUMBER. OTHER DEPARTMENT NUMBER(S) CANNOT BE USED.

Responsible account number(s) _____

Principal Investigator Signature: _____ Date: _____

Department Chair Signature: _____ Date: _____

Signature of responsible department number sponsor if not PI: _____ Date: _____

REQUEST APPROVAL

Office of Research Services _____ Date: _____

Department Number Assigned _____