

CHANGE OF PRINCIPAL INVESTIGATOR (PI/PD) INITIATION FORM

Submit this form, along with supporting documentation required by the sponsor, to Sponsored Programs to initiate a change of PI/PD for an existing proposal or awarded project.

Project Information

USU Control #:	Sponsor:
Name of Original PI/PD	Signature of Original Principal Investigator (PI/PD) <small>(or Department Head in the absence of original PI/PD)</small>
	MM / DD / YY

Contact Information of New PI/PD

Name of New PI/PD	Banner ID#	Phone Number	UMC	Email Address
College	Department	Research Center		

Assurances of New PI/PD

By signing below, I certify that:

- I have reviewed the approved proposal and award for this project, understand my obligations thereunder, will fulfill my obligations, and will personally conduct or supervise the described Sponsored Project
- I have read Chapter 2: Roles & Responsibilities in the USU Sponsored Programs Research Guide (<http://spo.usu.edu/files/uploads/ResearchGuide.pdf>) and accept responsibility as specified thereby
- I have notified the IRB, IACUC (as applicable), and all other required compliance offices of the change in PI/PD

Conflict of Interest:
The following Conflict of Interest section pertains to the Principal Investigator and all other Key Personnel involved with this project. The term "you" in these questions refers to the respondent or any member of the respondent's immediate family.

Yes No A. Do you have a significant financial interest or serve as a director or officer in a commercial organization:

- i. That could become involved in this project?
- ii. Whose business is substantially related to subject matter of this project?
- iii. That has requested rights to USU and/or SDL intellectual property?

Yes No B. Do you plan to use University facilities or personnel in the conduct of research, testing, or work for your outside interest that will be related to this project (or continuing) project?

Yes No C. Have you, or do you expect to, receive gifts of \$100 or more from a commercial entity that is connected to this project?

Yes No D. Do you supervise any students or other personnel who will be working on this project and who also work for your outside interest?

Yes No E. Is this project related to subject matter in which you are aware that another sponsor or entity has a claim to ownership or any rights granted by USU and/or SDL?

Name of New PI/PD	Signature of New PI/PD
	MM / DD / YY
Name of Dean of College	Signature of Dean of College
	MM / DD / YY
Name of Department Head	Signature of Department Head
	MM / DD / YY
Name of Director of Research Center	Signature of Director of Research Center
	MM / DD / YY

PI must initial here if this is NIH/PHS prime or flow through funding and Live Vertebrate Animals are being used. By initialing here the PI assures USU and the Sponsor that the information provided in the proposal / application is consistent with that information provided and approved in the IACUC protocol.

If NIH is the prime sponsor, or if NIH is providing flow through funding for this project, PI must initial here to indicate that he/she has read and understood the NIH Public Access Policy at <http://publicaccess.nih.gov>. Peer-reviewed articles accepted for publication on / after April 7, 2008 that result in whole or in part from NIH funded research must be submitted to the National Library of Medicine's PubMed Central via the NIH Manuscript Submission system and made available within 12 months of publication.

Sponsored Programs has received approval for PI/PD change from sponsor

Sponsored Programs Administration	Signature of Sponsored Programs Administration
	MM / DD / YY