EAST TENNESSEE STATE UNIVERSITY OFFICE OF RESEARCH AND SPONSORED PROGRAMS

Request for Exception to the Principal Investigator Eligibility Policy

_ast Name:			First Name: _		Middle Initial:
Current Position Ti	tle (e.g.	Adjunct faculty, p	art-time faculty,	emeritus faculty):_	
Requested Role:		ETSU Principa ETSU Co-Prin ETSU Co-Inve	ipal Investigator		
Please select the p ☐ Basic Research ☐ Training ☐ Other (Please de	☐ Ap	plied Research blic Service	☐ Developm☐ Other Ser	ental Research vice	☐ Other Research ☐ Equipment
Name and Title of t	he full-	time faculty me	mber serving	as Co-Principal	Investigator:
SIGNATURES AND	APPR	OVALS			
extend or increase request has been suparticipate in ETSU'	ny curre ibmitted s spons pplicabl	ent appointment through my hon ored programs v e federal laws ar	period nor does ne department/ vith integrity; ar and regulations,	s it create an obli- unit. In addition, nd that I will comp	y neither implies that ETSU will gation to do so; and that this I certify that I will lead, conduct and oly with sponsored award terms and codes, and ETSU policies and
Applicant Signature			_	Date	
this project. In the event department/u	est, I ce iry facili the appl unit will	rtify that: ties and other red licant is no longe collaborate with	quired resource or able or willing the ORSPA to	es will be availably	le to him/her through completion of ETSU research programs, the ed individual as a replacement or and ETSU policy.
Signature				Date	
☐ Not Approved	□ Ap	pproved – Indefir	nite End Date	☐ Appro	oved - End Date:
/ice Provost for Re				 Date	