

CHANGE OF PRINCIPAL INVESTIGATOR (PI) REQUEST FORM

Office of Research Administration (ORA)

For more information: <https://umaine.edu/ora/award-management/change-principal-investigator/>

Original PI Name (PI Last Name, First Name): _____

Sponsor: _____

Award ID: _____

Period of Performance: _____ Amount of Award: _____

Project Title: _____

Administrating Dept.: _____

Effective Date of Change: _____

Reason for change of PI: _____

(attach additional information if needed)

By signing below, I agree to remove myself as the Principal Investigator of the above-referenced project as of the effective date written above.

Signature of Original PI*

Date

Signature of Original Administrating Department Chair or Director

Date

Signature of Original Dean, if applicable

Date

*It may not be possible, in all instances, to obtain the signature of the current PI. If this occurs, please include the reason within the *Reason for change of PI*.

New PI Name (PI Last Name, First Name): _____

PI Telephone #: _____ PI Email: _____

Administrating Dept.: _____ New Closing Account Number: _____

College: _____ Financial Administrator: _____

New PI Qualifications Required Documents:

Attach new PI CV or Bio

Attach new PI Current and Pending Support

Attach Budget Revision, including cost-sharing plan, if applicable

Attach Other documents, if applicable per award terms and conditions

Current PI wishes to delegate authority for this award and is requesting the appropriate form.

NEW PI CERTIFICATION

By signing below, I certify that:

- I will i) accept responsibility for the scientific and ethical conduct of the project, ii) conduct the project in accordance with the terms and conditions of the sponsoring agency and the policies of the University, and iii) be fully responsible for meeting the requirements of the award, including providing proper stewardship of sponsored funds and submitting all required technical reports and deliverables on a timely basis.
- I have successfully completed the required Conflict of Interest Training and reviewed [<UMaine’s Policies and Procedures for Financial Disclosures and Conflicts of Interest in Extramurally Sponsored Activities>](#); and
 - DO NOT** have a significant financial interest in the proposed project.
 - DO** have a significant financial interest in the proposed project **AND** will prepare and submit a [<Significant Financial Interest Disclosure Form>](#) the Office of Research Compliance.
- I have reviewed the University’s Guidance on Foreign Talent Recruitment Programs (FTRP) and any applicable sponsor-specific guidance on FTRP and certify that I am not a party to a Malign Foreign Talent Recruitment Program (MFTRP). Further, I certify:
 - I DO NOT** have any activities which meet the definition of FTRP.
 - I DO** have one or more activities which meet the definition of FTRP and I will disclose this activity in my sponsor-specific forms (i.e. biosketch), as required.
- I am not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from current transactions by any federal department or agency as described in [<2 CFR §200.213 Suspension and debarment >](#).
- I will obtain all compliance approvals required to administer this project.
- I will abide by all policies and procedures as detailed in the document [Award Management: Role and Responsibilities of a Principal Investigator at the University of Maine](#); and

Signature of New PI

Date

NEW ADMINISTRATING DEPARTMENT CHAIR/UNIT DIRECTOR AND DEAN APPROVAL

By signing below, I agree to commit the support of the Department or Unit and College to this project and approve the change of Principal Investigator.

Signature of New Chair/Unit Director *

Date

Signature of New Dean *

Date

**Required when change of PI results in change of Department*

To Be Completed by the Office of Research Administration

Funds Remaining: \$ _____

Office of Research Administration

Signature of Director

Date

VICE PRESIDENT FOR RESEARCH AND DEAN OF THE GRADUATE SCHOOL

Signature of VPR

Date

Submit completed form to umgrants@maine.edu.