TO: Harry Greenberg, MD

Associate Dean of Research

RE: PI Waiver Request – **Part of a Large Interdisciplinary Program Exception**

**Applicant Name, Degree & Job Title:** Click or tap here to enter text.

**Department Name:** Click or tap here to enter text.

**Sponsor Name:** Click or tap here to enter text.

**Sponsor Program:** Click or tap here to enter text.

**Proposal Title:** Research into whether…

Dr. Greenberg:

We are requesting a PI waiver for Dr. XXXXXXX for the above referenced proposal. This proposed project fits within the scope of a large interdisciplinary program under the direction of faculty member, Dr. XXXXXXX. There is no member of the Academic Council or MCL faculty associated with the large interdisciplinary program who is qualified to take responsibility for the scientific direction of the prospective research project.

Provide description of the large interdisciplinary program. Confirm the program includes more than one faculty member. The program must also include expertise in more than one discipline or technical area.

Provide description of how the proposed project is a demonstrably important component of the success of the overall interdisciplinary program, as defined above.

We also understand that:

* the project will be conducted in existing space under the direction of the faculty named above. Additional incremental space will not be required.
* the department will provide resources needed for the duration of the award.
* for each graduate student participating on the proposed project, a qualified faculty member has been identified to assure that the student's research program and the education derived from it are consistent with the degree for which the student is a candidate.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.

XXXXXXXXXXXXXX, Division Chief\*

*\*If required by your department*

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.

XXXXXXXXXXXXXX, Department Chair

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.

Dr. Harry Greenberg, Associate Dean for Research

Attachment:

Applicant’s Biosketch