TO: Ruth O’Hara, PhD

Senior Associate Dean for Research

#### RE: PI Waiver Request – Specific Projects Which Are Part of a Shared Facility or Service Center

**Applicant Name, Degree & Job Title:**

**Shared Facility or Service Center Name:**

**Sponsor Name:**

**Sponsor Program:**

**Proposal Title:**

Dr. O’Hara:

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

*Provide description of the specific project that is part of a shared facility or service center. Confirm the center has an expected duration beyond the involvement of individual faculty participant and has users spanning many departments.*

*Provide description that there is a defined programmatic need of the shared facility/service center.*

We also understand that:

* the research or development to be conducted must be conducted within the shared facility/service center and affiliated locations only.
* the shared facility/service center Faculty Lead, the Center Advisory Board (if one exists), and the School Dean or designee (if applicable) all agree on the selection of the PI.
* 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:

Dr. \_\_\_\_\_\_\_\_\_\_, Division Chief\*

*\*If required by your department*

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Dr. \_\_\_\_\_\_\_\_\_\_, Department Chair

***RMG Use Only:***

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Dr. Ruth O’Hara, Senior Associate Dean for Research

SeRA PIF, PDRF or SPO# \_\_\_\_\_\_\_\_\_\_