## **Request for Exception to Principal Investigator Status**

This form serves as an exception to UCOP Contract & Grant Administration Handbook Part I.A.

Name:		C	arrent Job Title:	
Phone Number:		Eı	nail Address:	
School/ORU	:			
Supervisor/N	Mentor:			
Phone Number:		Eı	Email Address:	
Please allow	the above mentioned ind	lividual to serve as	Principal Investigator	
☐ This excep	otion applies to the project li	isted below. (Preferred		
☐ This excep	tion applies for the duration	n of the applicant's ap	ppointment. (Special Justification Needed)	
Project Title	:			
Sponsor:				
Other Investi	igators / Co-PIs (if any):			
Cayuse Record Number (if available):			Project Period:	
Please justify	the request for exception	n (attach an additio	n sheet if necessary):	
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equested by:				
pproved by:	Name	Signature	Date	
ean/Director:				
	Name	Signature	Date	
PONSORED PI	ROJECTS OFFICE USE	ONLY		
ice Chancellor:				
	Name	Signature	Date	