

PRE-AWARD RISK ASSUMPTION (PRA) REQUEST FORM



Please attach **PRA Budget and sponsor confirmation of funding to this signed request.**
 Complete this form and submit to your [Grants Specialist](#) in OSP, or to research@uncg.edu.

Project Information

Cayuse SP Proposal Number: P-_____ Current Fund Number, for existing projects: _____
 Project Title: _____
 UNCG PI: _____ Department: _____
 PI Phone: _____ Email: _____

IRB/IACUC approval or exemption is required prior to fund establishment:
 Are Human/Animal Subjects involved in this project? Yes No
 IRB/IACUC Application Status? Exempt Approved Study Number: _____

Award Information

Anticipated Award will be: New Continuing Renewal Supplement
 Funding Agency: _____
 Period of Performance: _____ To: _____ Award Amount: _____

Request to Initiate / Continue Project

PRA Type: New Existing Award Amend or Extend Existing PRA: Existing PRA Period: _____
 PRA Period of Performance: _____ To: _____ PRA Amount: _____
 Describe the request and provide justification. *Please attach sponsor issued documentation confirming pending award and PRA Budget.*

Certifications and Approvals

<p style="text-align: center;">PI Certification</p> <p>I confirm that this request adheres to University policy and a time-sensitive need exists to commit funds prior to funding approval.</p> <p>_____ Principal Investigator Signature Date</p>	<p>Central Office Only</p>
<p style="text-align: center;">Sponsored Programs Certification</p> <p>The Office of Sponsored Programs has reviewed the request and <input type="checkbox"/> recommends <input type="checkbox"/> does not recommend authorization by the Office of Research and Engagement.</p> <p>_____ Sponsored Programs Signature Date</p>	OSP Comments: _____ _____ _____ Specialist Initials/date: _____
<p style="text-align: center;">Contract and Grant Accounting Certification</p> <p>Contract and Grant Accounting has reviewed the request and <input type="checkbox"/> recommends <input type="checkbox"/> does not recommend authorization by the Office of Research and Engagement.</p> <p>_____ Contract and Grant Accounting Signature Date</p>	CGA Comments: _____ _____ _____ Specialist Initials/date: _____
<p style="text-align: center;">Office of Research and Engagement Certification</p> <p>The Office of Research and Engagement has reviewed the request and <input type="checkbox"/> approves <input type="checkbox"/> does not approve the PRA. Approval is granted in the amount of \$ _____ for work to be performed: _____ to _____.</p> <p>_____ Vice Chancellor for Research Signature Date</p>	ORE Comments: _____ _____ _____