

F&A Waiver/ Reduction Request Form

This form shall be used whenever a Principal Investigator seeks a waiver or reduction of the UNCG approved F&A rate where the sponsor does not have a published F&A rate.

Complete all sections of this form, including obtaining the signature approval of the Principal Investigator, and return electronically to <u>Terri Shelton, tlshelto@uncg.edu, copy research@uncg.edu</u>. Electronic signatures are acceptable. Please attach a copy of the specific RFP/RFA if available.

PROJECT INFORMATION

epartment:	Phone:	Email:	
Administrative Contact Person:			
lame of Sponsor or Funding Agenc	y:		
s Sponsor or Funding Agency a "for	profit" entity? Yes	No	
s the Sponsor/Funding Agency:	A Prime Recipient	Sub Recipient	Neither
		•	
If the Sponsor/Funding Agency is a Project Title:		•	
f the Sponsor/Funding Agency is a	sub recipient, please provide	the name of the prime rea	
If the Sponsor/Funding Agency is a Project Title:	sub recipient, please provide	the name of the prime rea	
If the Sponsor/Funding Agency is a Project Title: Project Duration:	sub recipient, please provide	the name of the prime rec	cipient:

JUSTIFICATION FOR REQUEST

Please provide a written justification of why you feel you need a reduction of indirect costs on this proposal at this time.

APPROVAL

Principal Investigator:

Name

Signature

Signature

Date

Date

UNCG Office of Research and Engagement Use Only:

Vice Chancellor for ORE

This request is:

Approved

□ Not Approved

□ Partial Reduction ____%

UNCG Office of Finance and Administration Use Only:

Vice Chancellor for Finance

Signature
This request is:
Approved
Not Approved
Partial Reduction ____%

Date