

Principal Investigator Eligibility Request Form

Please note application requires 50% FTE to be eligible

If you do not qualify for automatic PI status as outlined in the Principal Investigator Eligibility Policy, you may request an exemption for PI status using this form. This form must be approved prior to submitting your protocol/proposal package for Institutional Review Board (IRB), Office of Sponsored Programs (OSP), and Clinical Trials (CT) review. Approval is granted for each protocol/proposal only. You must include a current CV or Resume with this form. This form must be completed electronically and electronic submission is required.

For and attachments must be submitted as one complete pdf file to PIE@unlv.edu

Approvel Requested From: IRB O	OSP CT		
Applicant Information Name and Credentials:			
Current Title:			
Department:	UNLV C	Other Institution:	
E-Mail Address:	E-Mail Address: Phone Number:		
Proposal Information / Justification			
Title of the proposal/study:			
Brief description of the proposal/study:			
What role/responsibilities will be performed as	s PI:		
Required Signatures:			
Applicant's Signature	Applicant's Name	Dat	e
Department Chair/Unit Director Signature Dat	Dean Signati	ıre	Date
UNLV Employment Review:	V OFFICIAL SIGNATU	RES	
Current WD Payroll Title FTE %	(must be minimum of 50%	Meets	Does not meet
Approval Signature		ate	-
ORI OSP CT Only one needs t	to review and sign, as applice	able	
Print Name Signa	ture	Date	
Decision: Approved Not Approved	If not approved,	reason:	
VP for Research Signature Date			

Applicant completes sections 1-3 then email the signed form to: <u>PIE@unlv.edu</u> You will be notified if approved or not approved within 7 business days via e-mail.