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| UNIVERSITY OF CALIFORNIA, IRVINE |
| OFFICE OF CONTRACT AND GRANT ADMINISTRATION |
|  |
| REQUEST FOR APPROVAL TO TRANSFER ACTIVE CONTRACTS/ |
| GRANTS AND EQUIPMENT FROM UCI TO NEW LOCATION |
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| Complete this form to facilitate transfer of current contracts or grants and any equipment acquired thereunder from UCI to the new location. See reverse side for instructions. |
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| 1. Principal Investigator |       |  |
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| 2. Department/School/ORU |       |  |
|  |
| 3. Agency |       | Contract/Grant No. |       |
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| 4. Award Amount $ |       | Award Period |       | Fund No. |       |
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| 5. Fund balance anticipated at time of transfer (approximately) $ |       |
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| 6. Anticipated date of transfer |       |  |
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| 7. Name and location of new institution  |       |  |
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|  [ ]  Approval is requested to transfer the above named contracts/grants. |
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|  [ ]  Approval is requested to transfer equipment per the attached list. (List equipment by contract/grant number, agency, description of item, fund number, property number, and cost/value. Attach summary of removal costs and explain how costs will be paid.) |
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| SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE:       |
|  Principal Investigator |
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| CAMPUS CERTIFICATIONS/APPROVALS |
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| 1. Department Chair/ORU Director |
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|  [ ]  Approve transfer of contract/grant [ ]  Approve transfer of equipment acquired thereunder |
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|  [ ]  Approve transfer of equipment being used in and essential to continued performance of the contract/grant being transferred, but which was acquired under related sponsored agreements that have terminated. |
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|   |  |       |
|  Department Chair/ORU Director Date |
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| 2. School Dean |
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|  [ ]  Based on my review and the department chair’s recommendation, transfer of the contract/grant and equipment is hereby approved. |
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|   |  |       |
|  School Dean Date |
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| 3. Office of Contract and Grant Administration |
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|  [ ]  Request for transfer complies with University/agency policy. |
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|  [ ]  Request requires Equipment Manager to negotiate sale of equipment. |
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|   |  |       |
|  Manager, Contracts and Grants Date |
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| 4. Equipment Manager |
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|  [ ]  Equipment list verified correct and equipment transfer is approved. |
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|  [ ]  Equipment list contained item(s) that required recovery of cost. Estimated value based on the U.C. Useful Life Schedule or estimated residual value is $      . |
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|   |  |       |
|  Equipment Manager Date |
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| Upon completion, return to the Office of Contract and Grant Administration for distribution to the PI, Equipment Manager, and OCGA file. |
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| UCI/OCGA.120 (Revised 3/86)  |