



## Principal Investigator Status Request Form

This request form allows for the recommendation and approval of Principal Investigator (PI) status. All PI Status Requests must include a current copy of the candidate's CV.

Select one of the following:

### Current Employees

- ☐ Salaried employees not automatically granted PI eligibility. ([Refer to OSP's PI Eligibility Chart](#))
- ☐ Faculty on P-14 appointments. ([Human Resources information on P-14 employees.](#))

### Non-Paid Affiliate

- ☐ Emeritus Faculty
- ☐ Faculty separating from the university under certain circumstances.

**NOTE:** Prior to requesting PI Status, follow [Human Resources Procedure for a Non-Paid Affiliation Appointment](#).

### Candidate Information

NAME OF CANDIDATE FOR PI STATUS		UNIVERSITY ID NUMBER	
CANDIDATE EMAIL ADDRESS		CURRENT OFFICIAL RANK OR AFFILIATED RANK	
REQUESTING DEPARTMENT NAME AND ORG NUMBER			
OTHER AFFILIATED DEPARTMENT NAME AND ORG NUMBER (AS APPLICABLE)			
APPROVAL PERIOD REQUESTED			
<i>Indicate the requested period for eligibility. The period may be multiple years or indefinite. Final determination will be based on justification provided.</i>			
START DATE		END DATE	
JUSTIFICATION FOR MULTI-YEAR OR INDEFINITE REQUEST			
<i>Include a justification for PI Eligibility beyond one year or indefinitely.</i>			

JUSTIFICATION FOR REQUEST
<i>Include a justification for requesting PI Status for this candidate. Why do you want this individual to be a PI? Why does this individual need eligibility?</i>
SUPPORT MECHANISMS FOR PI
<i>Describe the department's mechanisms to support the PI for proposal preparation/submission and project management. Name the individuals providing support and the kinds of support they will provide.</i>

By signing below, the department head and dean/VP take responsibility for any default of deliverables or other financial obligations of the individual approved for PI status via this request.

## Department Contact

NAME	PHONE NUMBER	EMAIL

**Department Head or Director**

NAME	SIGNATURE	DATE

## Dean

NAME	SIGNATURE	DATE

### Office of Sponsored Programs Contact

NAME	APPROVED/NOT APPROVED	DATE
	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
SIGNATURE		
JUSTIFICATION FOR NON-APPROVAL		

Submit your completed request and a current copy of the candidate's CV to the Office of Sponsored Programs:  
[pistatusOSP@vt.edu](mailto:pistatusOSP@vt.edu).

## Appeal of Non-Approval of PI Status Request

If a candidate's PI status request is not approved, the individuals submitting the request may appeal the decision. The Office of the Senior Vice President for Research and Innovation will meet with those submitting the appeal and reach a final decision. Please initiate the appeal process by filling in the sections below.

Leave this page blank if no appeal is requested.

JUSTIFICATION FOR APPEAL		
Include a justification for appealing the decision of PI Status for this candidate. Provide a detailed rationale why the candidate should be granted PI Status.		
APPEAL DECISION		
NAME	SIGNATURE	DATE
<input type="checkbox"/> PI STATUS APPEAL GRANTED <input type="checkbox"/> PI STATUS APPEAL DENIED		
JUSTIFICATION FOR APPEAL DECISION		