

**Purpose:** The Award Administration Request Form (AARF) is used to collect UF internal approvals on several award related actions, noted below.

Award Principal Investigator: \_\_\_\_\_ Department: \_\_\_\_\_

Project #: \_\_\_\_\_ Sponsor: \_\_\_\_\_ Sponsor #: \_\_\_\_\_

**Award Action:**

- **Request to Change of PI or Key Personnel (addition and/or removal of any Key Person):** For reference see: [NIH Change in PD/PI and Other Senior/Key Personnel](#) or [NSF Changes in PD/PI, co-PI/co-PD or Person-Months Devoted to the Project](#),

Key Person Name	Key Person Role	UFID	Add or Remove?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Provide DSP a letter or email addressed to sponsor’s Grants Officer. The request should include the following information: Reason for the change, effective date, any changes in the scope including a scientific justification, any budget changes including effort commitment for all modified key persons. For new key persons, include a biographical sketch and other support information. For changes to NIH projects, include a completed [FCOI Form DSP-5](#) and certification of human subjects training, when applicable. If this is to create a Multiple PI project, include a Leadership Plan. For changes to NSF projects, include a completed [FCOI Form DSP-5](#).

- **Request to Establish a Subproject Not Originally Included:** the current award PI , subproject PI and their respective Dept Chairs sign this form. The request must include the following: brief statement of work, subproject budget by major budget category (personnel effort, fringe, supplies, etc.) and budget justification, budget period start date \_\_\_\_\_ and end \_\_\_\_\_ date. Dept ID to be used for Subproject: \_\_\_\_\_. If Human Subjects, provide IRB Approval # \_\_\_\_\_. If using Animals, provide IACUC Approval # \_\_\_\_\_.
- **PI changing Depts and transferring existing Awards to New Dept:** The primary/award PI and new Dept Chair sign this form. The request must include the following information for each award being transferred: Unobligated balance (direct, indirect and total) confirmed by C&G Accounting, budget period start date \_\_\_\_\_ and end \_\_\_\_\_ date.

**Principal Investigator/s Endorsement:** By signing this form you agree to perform the work, manage the project and submit all required reports in accordance with applicable University, State, Federal and Sponsor policies and procedures.

Current Award Principal Investigator	Date	Current Award PI’s Dept Chair Concurrence with Request	Date
New Award or Subproject Principal Investigator	Date	New Award or Subproject Dept Chair Concurrence with Request	Date
UFID #: _____			

Approved: Division of Sponsored Programs Date