REQUEST FOR AWARD TRANSFER OR RELINQUISHMENT BY ORAL ROBERTS UNIVERSITY

Submit this completed form to the Office of Sponsored Programs when the Principal Investigator plans to do one of the following:

• Transfer an award from a federal or non-profit funding agency to another institution

Principal Investigator:		Agency and Award Name:		
Name of Award:		Cost Center Number:		
Principal Investigator's Phone Number:		Administering Department:		
AWAF	D TRANSFER/RELINQUISHMENT INFORM	ATION		
	the funding agency's required transfer forms (if apport Sponsored Programs may contact the Principal In		eeded, t	he
(a)	Date PI will leave Oral Roberts University (ORU):			
(b)	Date the award will be relinquished from ORU:			
(c)	Name of the new institution:			
(d)		man Subjects? imal Subjects?	□ Yes	
(e)	Does this award involve cost-sharing?		□ Yes	
(f)	Does this award involve one or more subcontracts? If yes, has the PI/Department notified the subcontractor(s) of the pending transfer? Name of the subcontractor(s):		□ Yes	□ No
(g)	Will any award-acquired equipment be transferred to the If yes, please specify:			
(h)	Will any portion of this project need to be subcontracted back to Oral Roberts University by the new institution (example: to fund graduate students completing degrees, to cover work that will not be transferred)?		□ Yes	□ No
(")	Have any inventions been disclosed under the award, or	does the award involve use of patented materials?	□ Yes	

SIGNATURES DESIGNATING APPROVAL FOR THE TRANSFER/RELINQUISHMENT					
Principal Investigator relinquishing or transferring award	Director of the Office of Sponsored Programs				
Department Chair	Other				
Dean	Other				