

# UNIVERSITY OF HAWAII AWARD TRANSFER REQUEST

**Award Number:** \_\_\_\_\_

**Agency:** \_\_\_\_\_

**Principal Investigator:** \_\_\_\_\_

This is to notify the Office of Research Services that the above principal investigator will be terminating employment at the University of Hawaii effective \_\_\_\_\_. We would like to request funding agency approval to:

- [ ] nominate \_\_\_\_\_ as a substitute PI.  
(prepare letter of request to the agency; and provide name and signature of substitute PI, qualifications, and current and pending support information from all sources; submit new ORS Form 5)
- [ ] terminate and closeout project; submit Final Project Report.
- [ ] transfer award and remaining unobligated funds in the amount of \$ \_\_\_\_\_ to \_\_\_\_\_ (name of PI's new organization). (Attach transfer request form)

**REQUESTED BY (signatures):**

PI: \_\_\_\_\_ Date: \_\_\_\_\_

Dean/Director: \_\_\_\_\_ Date: \_\_\_\_\_

**FISCAL CERTIFICATION BY:**

Fiscal Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR ORS USE ONLY:**

Verified with ORS Acctg: \_\_\_\_\_ Ledger Balance \$ \_\_\_\_\_

Reviewed \_\_\_\_\_ Date \_\_\_\_\_ URC Matching Funds \*[ ] Yes [ ] No

copy ORS Acctg  
\*If yes, copy URC Fiscal Officer