

## University of Hawai'i INTERNAL SERVICE ORDER (S/O) FORM

Pursuant to the Internal Agreement between the University of Hawai'i (UH) and the Research Corporation of the University of Hawai'i (RCUH), the UH hereby requests the RCUH to provide services as may be required by the Principal Investigator (PI) in the administration of the following project.

S/O #: \_\_\_\_\_ RCUH Project #: \_\_\_\_\_ Change #: \_\_\_\_\_  
UH College / Unit: \_\_\_\_\_ UH Department: \_\_\_\_\_  
Project Name: \_\_\_\_\_  
Project Period: \_\_\_\_\_ Campus / UH Account: \_\_\_\_\_  
Principal Investigator: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_  
Designated UH Official (FA): \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

The conditions under which a project may be service ordered to RCUH are listed below. Please specify which conditions may apply to this request and provide an explanation/justification (use additional sheets as necessary).

### New Project Request:

- |                          |     |   |
|--------------------------|-----|---|
| <input type="checkbox"/> | (a) | Projects involving a private organization.  |
| <input type="checkbox"/> | (b) | Projects in which there are unusual procurement problems, such as major items of special equipment, or complex equipment construction.                            |
| <input type="checkbox"/> | (c) | Projects in which much of the operation will lie outside the State.   |
| <input type="checkbox"/> | (d) | Projects in which there are human resource problems which might be handled more effectively outside the State or UH personnel system.                             |
| <input type="checkbox"/> | (e) | Projects in which there is a substantial amount of ship operations, technical shop-type operations, computer services, involvement with other RCUH projects, etc. |
| <input type="checkbox"/> | (f) | Projects involving research facility management where any combination of the above mentioned problems exist.  |
| <input type="checkbox"/> | (g) | Projects in which other special problems are present that may be better resolved through the services of the RCUH. Please explain: _____                          |

### Revisions:

- |                          |     |                                      |   |
|--------------------------|-----|--------------------------------------|---|
| <input type="checkbox"/> | (1) | Close Project effective: _____       | Return funds \$ _____ to _____ (Location) |
| <input type="checkbox"/> | (2) | Extension of Project to: _____       |   |
| <input type="checkbox"/> | (3) | Initial / Increase Funding: \$ _____ | Total Project: \$ _____                   |
| <input type="checkbox"/> | (4) | Decrease Funding: \$ _____           | Total Project: \$ _____                   |
| <input type="checkbox"/> | (5) | Other: _____                         |   |

Scope of Work (Brief explanation not to exceed thirty words)

REQUESTED BY:	_____	DATE:	_____
	Principal Investigator		
APPROVED BY:	_____	DATE:	_____
	Department Chair		
	_____	DATE:	_____
	Dean / Director or Designee		
REVIEWED BY:	_____	DATE:	_____
	Fiscal Authority / Designated UH Official		
	_____	DATE:	_____
	Vice President for Rsch / Vice Chancellor for Rsch / or Designee		
ACCEPTED BY:	_____	DATE:	_____
	RCUH Executive Director or Designee		