wdmk

**U Wide Form:**

UM 1628

**Rev:** 9/26/2018

**Route completed form to:**

Director of SPA

450 McNamara Center

# REQUEST FOR EXCEPTION TO OPENNESS

# IN RESEARCH POLICY

|  |  |  |
| --- | --- | --- |
| PI and Co-I Names: | | |
| Phone number where the PI can be reached: | | EGMS Proposal No. |
| Project Title: | | Project period: |
| Sponsor: | | Proposed award amount: |
| Location where research will be conducted: | | |
| Will compliance committees need to approve the project (if so, which ones)? | | |
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|  | | |
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| **To be completed by the principal investigator:** | | |
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| Date submitted: | | |
| 1) | Please provide a summary of the proposed research in non-technical terms and suitable for public discussion. | |
|  |  | |
|  | | |
| 2) | Please provide a summary of the significance of the proposed research, i.e., how it will contribute significant new knowledge to science, benefit the state or national public good, provide educational opportunities that could not be found elsewhere, or significantly advance your program of research. | |
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|  | | |
| 3) | Please provide a summary of any history you have of work with this sponsor. | |
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|  | | |
| 4) | Will any special security arrangements be needed?  yes  no | |
|  | If yes, describe them, how long they will be needed, the cost, and who will pay for them. | |
|  |  | |
|  | | |
| 5) | How will this project affect the educational progress of students working in your group? | |
|  |  | |
|  | | |
| 6) | How will this project affect the career progress of faculty, staff, or postdocs working in your group? How will they be accommodated? | |
|  |  | |
|  | | |
| 7) | To what extent will faculty, staff, postdocs, and students involved in the project be able to publish and discuss the progress and results of their work with individuals not involved in the project? | |
|  | No restrictions  Some restrictions | |
|  | If there will be restrictions, describe them and how the career or educational needs of the individuals can be met: | |
|  |  | |
|  | | |
| 8) | Are there any other reasons why this exemption should be granted? | |
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| **To be completed by the attorney in the Office of General Counsel:** | | |
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| Date completed: | | |
| 1) | Does this agreement raise any issues that need to be considered in making a decision? | |
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| **To be completed by the Director of Sponsored Projects Administration:** | | |
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| Date completed: | | |
| 1) | Please provide a short narrative of the negotiation process. | |
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| 2) | Please describe the problematic contractual restrictions that led to this request. | |
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| 3) | Is this a restriction that is becoming more commonplace as a result of the funding environment? How are other institutions responding to these types of requests? | |
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| 4) | Does the sponsor request this restriction on all agreements, regardless of need or is the sponsor asking for this restriction because of the nature of this particular project? Is the sponsor or prime contractor a government agency? | |
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| **To be completed by the chair of the Senate Research Openness Subcommittee:** | | |
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| Date completed: | | |
|  | | |
| The subcommittee recommends that this exemption request be: | | |
|  | Granted | |
|  | Granted with conditions (see “notes” below) | |
|  | Denied | |
|  | | |
| Votes: Number for an exemption:       Number against:       Abstain: | | |
| Notes: | | |
|  | | |
|  | | |
| **To be completed by the chair of the Senate Research Committee:** | | |
|  | | |
| Date completed: | | |
|  | | |
| The committee recommends that this exemption request be: | | |
|  | Granted | |
|  | Granted with conditions (see “notes” below) | |
|  | Denied | |
|  |  | |
| Votes: Number for an exemption:      Number against:      Abstain: | | |
| Notes: | | |
|  | | |
|  | | |
| **To be completed by the Vice President for Research:** | | |
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| Date completed: | | |
|  | | |
| The Vice President recommends that this exemption request be: | | |
|  | Granted | |
|  | Granted with conditions (see “notes” below) | |
|  | Denied | |
|  | | |
|  | | |
| Notes: | | |
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