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| Principal Investigator Eligibility Request  Use this form to request Principal Investigator Eligibility for a project from the UNM IRB.   |  |  | | --- | --- | | Instructions: | Complete the required sections.  Sections marked with an asterisk ( \* ) are required.  Sections marked with a double asterisk ( \*\* ) are required if applicable. | | C:\Users\cbcholka\AppData\Local\Microsoft\Windows\INetCache\Content.Word\UNM_OfficeInstitutionalReviewBoard_Horizontal_RGB.PNG  1805 Sigma Chi NE | Tel: (505) 277-2644  Website: irb.unm.edu | Email: [IRBMainCampus@unm.edu](mailto:IRBMainCampus@unm.edu) |

**As required by the Office of the Institutional Review Board policy for Principal Investigator Eligibility, the following person requests approval to serve as Principal Investigator on the specified IRB project:**

|  |  |  |  |  |  |  |
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| Project Identification | | | | | | *To be completed by the individual requesting PI Eligibility* |
| \* Name: |  | | | | \* Email: |  |
| \* Department: | |  | | | \* Phone: |  |
| \* University Status (e.g. tenure track or visiting faculty, instructor, staff, etc.): | | | |  | | |
| \* *The individual requesting Principal Investigator privileges for this project is:*  *(select one)* | | | UNM Main and Branch Campus staff employee without a LAT and research activities are within the scope of the individual’s job responsibilities | | | |
| UNM Main and Branch Campus faculty employee who is 0.25 FTE or less | | | |
| Unpaid faculty, emeritus faculty or visiting scholar from other institution conducting UNM engaged research | | | |
| Other - Specify: | | | |
| *\* Title of the project:* | | |  | | | |
| *\* Reason for this request:*  *Limit 500 characters* | | |  | | | |
| *\* List qualifications and any credentialing required to serve as PI on a human research project:*  *Limit 500 characters* | | |  | | | |

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| Department Chair/Director or Designee Authorization | | *To be completed by the Department Chair/Center Director* | | |
| As Department Chair/Center Director, I recommend that the above named individual be approved to serve a Principal Investigator on this project, and certify that I agree to assume all responsibilities, including financial, for this project if the named Principal Investigator fails to complete their responsibilities related to human research and the Office of the IRB. I further certify that this individual is qualified to serve as PI on this project and that they have the appropriate credentials and experience to do so. | | | | |
|  | | | |  |
| \* Signature | | | | \* Date |
|  |  | |  | |
| \* Full Name | \* Title | | \* Department / Center | |

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| UNM IRB Authorization | | | | | |
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|  |  |  | The above named individual has been **granted** approval to serve as Principal Investigator on this project. | | |
|  |  |  |  | | |
|  |  |  | The above named individual has been **denied** approval to serve as Principal Investigator on this project. | | |
|  | | | |  | Linda Mayo |
| \* Signature of Director, Human Research Protections Program | | | | Date | \* Printed Name |