



**UNIVERSITY OF THE DISTRICT OF COLUMBIA  
REGISTRATION REQUEST  
FOR PROSPECTIVE PRINCIPAL INVESTIGATOR**

*Principal investigator roles and responsibilities are limited to individuals in regular faculty positions or in regular, professional-level administrative positions at the University.*

1. Name: \_\_\_\_\_
2. Position Title: \_\_\_\_\_
3. Academic Department or Administrative Unit: \_\_\_\_\_
4. Name and signature of Department or Administrative Unit Head  
\_\_\_\_\_
5. Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_
6. Email address: \_\_\_\_\_
7. Highest academic degree: \_\_\_\_\_ Year Awarded: \_\_\_\_\_
8. Highest degree field: \_\_\_\_\_
9. Awarding institution: \_\_\_\_\_
10. Other degrees and fields: \_\_\_\_\_
11. Agencies or E-Portals:
  - a. National Science Foundation (Fastlane) and Research.gov
  - b. National Institutes of Health (eRA Commons)
  - c. FedConnect
  - d. Other (list all) \_\_\_\_\_  
\_\_\_\_\_

I understand the responsibilities of a principal investigator, and I agree to follow UDC and sponsor policies and procedures in developing proposals, preparing them for submission, and in accomplishing and reporting the work for any funded project.

\_\_\_\_\_  
Signature Date

<b>OSP USE ONLY</b>	
Agency 1: _____	Agency 2: _____
Date Input: _____	Date Input: _____
Agency ID: _____	Agency ID: _____
User Password: _____	User Password: _____
Date User Notified: _____	

Please submit this form by email or fax to the UDC Office of Sponsored Programs