

University of California, ANR

Revised 11/17/23

Mail or E-mail this form to: Office of Contracts and Grants, 2801 Second Street, Davis, CA 95618, E-mail: OCG@ucanr.edu

## REQUEST FOR EXCEPTION TO POLICY ON ELIGIBILITY TO SUBMIT PROPOSALS

Name:		
Payroll Title:		
Employment Type:   Career or   Te	erm (if Term enter end date:	)
Are you: ☐ Permanent Funded ☐ 0	Grant funded   Other:	
Requesting:   Blanket Exception (fo	r Career only-includes future projects)	☐ Project Specific Exception Only
Sponsor Name:	Prime Sponsor (if o	lifferent):
Title of Proposal:		
% Effort on Proposal*: Direct Charge:_ *Effort percentages are estimates. Subject to cha	%; Cost Share**:	% Total:% o effort identified as cost share on the budget form.
I understand that approval of this excep appointment period nor does it obligate		versity will extend or increase my current
Please attach current CV. Supervisor Statement of Support:	Signature of Applicant	Date
REC Director verifies that (a) approval can be assigned to this project without d (c) the Director is aware, and understan	of this request is in the best interest of detriment to the regular research and extends, that in the event that the proposed PI nsible for appointing a qualified PI to com	ector, by signing below, County/ Statewide/ the University, and (b) space and facilities ension responsibilities of the University, and for any reason may not be able to complete aplete the project.  REC Director, agree with and accept the
	Signature (County, Statewide Program, o	or REC Director) Date
Email to ocg@ucanr.edu		
Reviewed by Office of Contracts and G	Grants:	
Brent Hales, Associate Vice President		Approved, <b>Proposal Specific Exception</b> Approved, <b>Multiple, through:</b> Not Approved
Bronk Halos, Associate vice i lesidelit	Date	