

PRE-APPROVAL FORM FOR EXTERNAL AFFILIATIONS / AGREEMENTS

For Office Use Only:

Date Logged: _____

Logged in by: _____

[MOU / MOA / CONTRACT / PROPOSAL INVOLVING
EXTERNAL AFFILIATION / PARTNERSHIP / FUNDING]

PLEASE NOTE: This form, including all required signatures, must be completed **before** any external agreement is initiated or executed on behalf of the University. The completed form should be submitted via email to sponsoredprograms@udc.edu and cao@udc.edu. **Please allow at least two weeks for approval.**

PART I: OVERVIEW

UDC COLLEGE/SCHOOL OR UNIT		
UDC PRIMARY CONTACT (<i>Last, First</i>)	TITLE	DEPARTMENT
ADDRESS	PHONE	EMAIL

PARTNERING INSTITUTION/ORGANIZATION (<i>Name, Location</i>)		
PRIMARY CONTACT (<i>Last, First</i>)	TITLE	DEPARTMENT
ADDRESS	PHONE	EMAIL

PROJECT TITLE/ FOCUS:

TYPE OF AGREEMENT (check all that apply)		
<input type="checkbox"/> New MOU/MOA	<input type="checkbox"/> Renewal (Original agreement effective date _____)	<input type="checkbox"/> Research Collaboration
<input type="checkbox"/> Funding Opportunity Amount (\$)	<input type="checkbox"/> SubAward/SubRecipient Opportunity	<input type="checkbox"/> Intra-district (DC Agency-led)
<input type="checkbox"/> OTHER (please describe) _____		
<input type="checkbox"/> Student and/or Faculty/Staff Exchange	Will any portion of the project occur outside of the U.S.?	<input type="checkbox"/> Yes <input type="checkbox"/> No

ALL SECTIONS REQUIRED FOR SUCCESSFUL PROCESSING.
Failure to submit a complete form will result in delays in the approval process.

PURPOSE OF AGREEMENT: <i>Please insert or attach a brief statement describing the goals of the proposed agreement.</i>

PROFILE OF PARTNER: <i>Please insert or attach a brief description of the partnering institution, organization, or agency.</i>

BENEFIT TO UDC: <i>Please insert or attach a statement outlining why the proposed agreement would be beneficial to UDC. Required: Include details describing why you have chosen to work with this specific institution, agency, etc.</i>
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UNIVERSITY OF THE DISTRICT OF COLUMBIA – OFFICE OF THE CHIEF ACADEMIC OFFICER
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AGREEMENT DURATION <i>(All agreements must include an effective date and an end date or project duration. In general, agreements are approved for a period of up to five years.)</i>			
Effective Date:	End Date:	Project Duration:	Potential for Renewal: <input type="checkbox"/> Yes <input type="checkbox"/> No

INSTITUTIONAL COMMITMENT REQUIRED <i>(Please explain or attach a proposal outlining UDC resources needed)</i>	
<input type="checkbox"/> Funding (amount, source, duration)	<input type="checkbox"/> Space (amount, location)
<input type="checkbox"/> Other (describe)	

PART II: INTERNAL APPROVALS *(Signatures with an asterisk [*] are required.)*

	Name	Signature	Date	Not Approved / Comments <i>(continue below if needed)</i>
*UDC PRIMARY CONTACT/ PROJECT DIRECTOR				
*DEPARTMENT CHAIR OR DESIGNEE				
*DEAN OR UNIT DIRECTOR <i>(Indicates endorsement and/or approval of proposed agreement including any resulting financial or administrative obligations)</i>				
OFFICE OF SPONSORED PROGRAMS (* If funding involved) VICE PRESIDENT FOR RESEARCH <i>(Must be signed if any portion of project involves research or occurs outside the U.S.)</i>				
To be completed by the Office of the Chief Academic Officer:				
*OFFICE OF THE PROVOST / CHIEF ACADEMIC OFFICER				

ADDITIONAL COMMENTS:

Section below to be completed only if Legal Sufficiency Review of MOU/MOA/Agreement is required.

To be completed by Office of General Counsel (OGC) after Internal Approvals and Legal Review.

	Name	Signature	Date
*OFFICE OF GENERAL COUNSEL			

Date OGC Review Completed: _____