

**PI/PD Transfer of Project Responsibility Form (PTR)
submit with Revision Clearance Form (RCF)**

Current PI/PD: _____

NEW PI/PD: _____

Project Title: _____

Banner FOP: _____ **Effective date:** _____

NEW PI/PD completes all sections below.

DISCLOSURES AND CERTIFICATIONS	
	YES or NO
1. I have read & understood SFA policy A-11.5 on conflicts of interest in sponsored projects.	
2. Do you or other key project personnel, spouses(s), dependents, or other household members have a financial interest in this project?	
If yes , have you already made all of the required disclosures and agree to comply with any conditions or restrictions imposed to manage, reduce, or eliminate actual or potential conflicts of interest?	
3. Are you presently delinquent in any federal debt, including student loans?	
4. Are you presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from current transactions by any federal/state department or agency?	
5. To the best of your knowledge, federal funds have not been used and will not be used to influence or attempt to influence members of Congress in the granting of this award.	
6. Are you in compliance with federal and university requirements for a drug-free workplace?	
7. Are you delinquent in submitting final project reports to sponsors for previous awards?	
8. Within the three-year period preceeding this application, have you had one or more public transactions (federal, state or local) terminated for cause or default?	

My signature below certifies that:
1. I have reviewed the project application, award document, and other pertinent materials.
2. I agree to assume full responsibility for ensuring project compliance with all applicable federal, state, sponsor and university requirements, policies and procedures.
3. I agree to accept full responsibility for the management of this project, including any applicable scientific conduct.
4. I understand that any false, fictitious, or fraudulent statements or claims made in conjunction with this project may subject me to criminal, civil, or administrative penalties.
5. I agree to provide the required progress and final reports as required by the sponsor.

Signature	Date

Sign and attach the Financial Conflict of Interest Disclosure Form (FCOI) for federal and federal pass-through awards.