EXHIBIT B

REQUEST FOR EXCEPTION TO SUBMIT PROPOSAL FOR EXTRAMURAL SUPPORT

Request must be submitted to the appropriate Vice Chancellor or Dean ten (10) working days prior to agency due date.

SOLE PI  CO-PI

Present payroll Title: ___________________________ % Time: _____ Effective Dates: ___________

Proposed payroll Title: ___________________________ % Time: _____ Effective Dates: ___________

% Salary on Proposal: _____ % Effort on Proposal: _____ Period to be Paid from Proposal: ________

Agency: ___________________________ Agency Due Date: ____________________________

UCSD #: ___________________ Proposal Title: ________________________________________

Proposal Period : Begin Date: __________ End Date: ____________ Proposal Amount: __________

PLEASE ATTACH A CURRICULUM VITA OR BIO-BIBLIOGRAPHY, A TWO TO THREE SENTENCE DESCRIPTION OF THE PROPOSED RESEARCH, AND THE DEPARTMENT’S RESPONSES TO THE FOLLOWING QUESTIONS IN SEQUENCE:

1. How will the project or program contribute to the "basic academic plan" and/or research programs of the department or organized research unit?
2. What are the qualifications of the individual to undertake the proposed project or program? If the proposed PI is a project scientist, discuss his/her demonstrated strong potential for conducting independent research. If sole-PI status is requested, state why no regular faculty or research scientist is to act as co-PI with the applicant.
3. What are the unit’s plans for future appointment status of the individual through the end date of the proposed grant period and afterwards?
4. Does adequate space for project exist within the unit for the duration of the project?
5. What fund sources are budgeted to provide the balance of the person’s salary when less that 100% salary is requested in the proposal?
6. What fund source will provide support services; e.g., secretarial support, supplies, duplication, telephones?
7. If proposed project or program is not funded, what are the future plans for individual requesting this exception to policy?
I understand the approval of this exception to policy does not imply that the University will extend or increase my current appointment period, nor does it obligate the University to do so.

________________________________
Signature of Proposed PI / Date

________________________________
Department Chair/ORU Director / Date

Vice Chancellor-Marine Sciences / Date
or Dean-School of Medicine

________________________________
Vice Chancellor for Research / Date

CONDITION:
Approval is contingent upon appointment to the proposed title and favorable endorsement by the Affirmative Action Coordinator

________________________________
Name / Extension

________________________________
Email Address / Mail Code