

Principal Investigator Award Agreement (PIAA)

OGCA NUMBER: _____

SPONSOR AWARD NUMBER: _____

PROJECT TITLE: _____

GPID NUMBER: _____

- **APPROVE and ROUTE** this form to OPAM and provide documentation/forms requested in the OPAM email instructions. **Failure to do so may delay the processing of your award**
- **REVIEW** thoroughly the attached copy of your award (including all terms and conditions)
- **REVIEW** the PIAA attachment which highlights specific guidance for your award administration
- **KEEP** the attached copy of your award and PIAA attachment for your records and for future reference
- **NOTIFY** your administrator handling this award if you have any questions or concerns about any of the terms of the award.
- **IN SIGNING** this agreement, you agree to abide by both the terms and conditions of the award, and any relevant University policies and procedures. A comprehensive list and full text can be found at:

[Policies, Guidance, and Forms related to Awards at UMass](#)

[Controller's Office – Research Accounting](#)

[Uniform Guidance](#) (Federal Awards)

- **MONITOR** and check your current effort commitments to ensure that you are not overcommitted. If you are, contact your OGCA award administrator for guidance on how to manage.
- **ENSURE** that all publications and presentations include a proper disclaimer and acknowledgment of sponsorship as directed in the terms and conditions.
- **IF this project involves the use of rDNA or sDNA**, your approval of this PIAA signifies your understanding that you cannot begin the work until you've fulfilled your obligations under NIH regulation <http://osp.od.nih.gov/office-biotechnology-activities/biosafety/nih-guidelines>. *If you have questions or need assistance, please contact the Office of Research Compliance.*

By my signature affixed below, I confirm that I fully understand my responsibility as Principal Investigator, will carry out the project with the highest professional standards, and abide by all terms and conditions associated with this award (both sponsor and University). I understand that any false, fictitious, or fraudulent statements, claims or activities may subject me to criminal, civil, or administrative penalties.

Signed and Agreed:

Principal Investigator (signature must be the PI, no delegated authorities are granted for this approval)

Date

Signed and Agreed:

Multiple Principal Investigator (signature must be the PI, no delegated authorities are granted for this approval) Date

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