**UNI Cost Transfer Explanation & Justification Form**

**(Refer to Cost Transfers on Sponsored Project Guide for assistance in completing this form, if necessary)**

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| --- | --- | --- |
| Prepared by: | Phone number: | Date:  |
| Original transaction date: | Project end date: |
| Transfer from account number: |
| Transfer to account number:  |
| 1. If this is a salary transfer answer the following questions, if not, skip to number 2.  |
| Who’s salary is being transferred:  | Has this person’s effort been certified for the period in which the transfer occurs? Yes No  |
| 2. Was this cost transfer *initiated* within 45 days after the original transaction date? If no, please explain why. |
| 3. Please explain why this cost transfer has not been completed within 90 days of the original transaction date. (Attach any necessary supporting documentation.) |
| 4. What action is needed/what steps have been taken to eliminate late cost transfers? |
| Principal Investigator or Project DirectorSignature: |  | DATE: |
| PHONE: |
| PI/PD Printed Name: |  |
| Department HeadSignature: |  | DATE: |
| PHONE: |
| Department Head Printed Name: |  |
| ***By signing above, requestors certify the cost to be transferred is an appropriate expenditure for the sponsored project and the expenditure complies with the terms and restrictions governing the sponsored project****.* |
| Request Approved?YES NO | Unrestricted account number for denied requests:   |
| Why is request denied? |  |
| Office of Research & Sponsored Programs:Signature: |  | DATE: |
| Office of Research & Sponsored Program Printed Name: |  |