

Sponsored Programs Administration
Office of Sponsored Programs | Contract and Grant Administration

MSU AWARD TRANSFER OR TERMINATION CHECKLIST

		Email: awards@cga.msu.edu		
•	Principal Investigator Name: MSU Department Contact Name Principal Investigator's last day a			
Activ	e Sponsored Program Award:			
	unt Number rd Number	New End Date Remaining Balance		
		ating that this award will transfer to the PI's new institution? \Box Yes \Box No ovide the additional information requested below. If no, please skip to Question 2 below.		
•	Name of the PI's new institution: o If NIH or NSF award, plea Pre-Award contact at the new ins	ase provide the DUNS for the new institutio	n:	
•	Is the PI current with all technica Does this project being transferr Will there be a subaward from the Please list any equipment that w	ne new institution back to MSU?	?	
2. F	lease provide a justification for the	e award to be transferred/terminated:		
If	ng/Expiring Sponsored Program the PI is the lead PI on this Sponso dditional information requested be	ored Program Award that is ending or has e	ended, please provide the	
•	If yes, will they be submitted price	eports or deliverables due to the Sponsor? or to the PI leaving MSU? Ited submission date, and contact informati	☐ Yes ☐ No	
	Dean/Chair Sig	gnature	Date	