



POSTDOCTORAL FELLOW INTENT TO SERVE AS PRINCIPAL INVESTIGATOR (PI)

Section I – Grant Proposal Information

Sponsor Name	
Proposal No. and Title	
Postdoctoral Fellow	
Faculty Mentor	
Department	

Sponsor Type:

- Federal
- Foundation/Non-Profit
- Commercial/For-Profit

Application Type:

- New*
- Resubmission*

Section II – Attestations

POSTDOCTORAL FELLOW:

1. I have read and agree to be bound by all applicable policies of Johns Hopkins University and the School of Medicine.
2. I agree to take any trainings/courses as required by the University/School of Medicine to serve as Principal Investigator should this proposal be funded.
3. I have read and agree to comply with the sponsor's terms and conditions for submission of this proposal and will abide by the terms and conditions of any award as Principal Investigator.
4. In the event that this proposal is funded, I agree to notify the School of Medicine Office of Research Administration at ora@jhmi.edu promptly of any changes to my appointment.
5. I confirm that I meet the sponsor eligibility requirements to serve as PI for this proposal.

FACULTY MENTOR: I have reviewed this proposal, support the Postdoctoral Fellow's role as Principal Investigator on this application, and agree to provide appropriate training and supervision of the Fellow. I accept responsibility for the scientific conduct of the project, if awarded, and shall provide any outstanding scientific and/or administrative project deliverables (e.g. progress reports, closeout documents, etc.) should the Postdoctoral Fellow leave JHU and/or be unable to do so.

DEPARTMENT CHAIR/DIVISION DIRECTOR: I support the Postdoctoral Fellow's proposal and confirm that the department and Faculty Mentor will provide appropriate training, supervision, and access to facilities and administrative support, as appropriate.

	<i>Name</i>	<i>Signature</i>	<i>Date</i>
Postdoctoral Fellow			
Faculty Mentor			
Department Chair / Division Chair			