New Principal Investigator Certification

Name of new PI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IRB#\_\_\_\_\_\_\_\_\_\_\_\_

Study Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As the new Principal Investigator of this study:

I confirm that I have the proper training, expertise, and resources to conduct this study. I understand and accept my responsibilities as the Principal Investigator for this study. I confirm that I have no significant financial conflict of interest in this project or have disclosed a conflict per institutional policies and federal requirements. I confirm that the information provided in this application is true, complete, and accurate to the best of my knowledge; that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties; and agree to accept responsibility for the oversight and scientific conduct of the project.

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Signature of New PI Date

\*\*Attach the signed copy of this letter to the Cayuse IRB Modification submission in Section M2 *Modification Description*, item A.2a.