



**MEMO**

**Date:**

**To:** Charlene Hart, Associate Vice President, Research Administration

**From:**

**Re:** Disposition of Active Sponsored Projects

This memo is to inform you that I will be leaving the University of Nevada, Reno (University) on the following date:

Regarding my active sponsored projects, I have indicated the proposed disposition plan for each on the attached Proposed Disposition Plan for Active Sponsored Projects Form and hereby request approval of the plan.

**Sponsored Project Equipment Transfer Request**  (check box if applicable)

In addition to the attached sponsored projects disposition plan, I am also requesting the transfer sponsored project funded equipment to my new institution and have attached the Sponsored Project Equipment Transfer Request form for approval.

I understand



**Proposed Disposition Plan for Active Sponsored Projects (SP-DP)**

Complete this form to propose a disposition plan for your active sponsored projects prior to leaving the University. Attach completed, signed form to the Proposed Disposition Plan Cover Memo and forward to Sponsored Projects, Mail Stop 325.

**Principal Investigator Information**

Name: Phone/Email:  
Unit: Department:

**Project Information**

Project Title:  
Sponsor:  
Workday AWD #: Current Award Balance:  
Project Start Date: Project End Date:  
Proposed Disposition:

Project Title:  
Sponsor:  
Workday AWD #: Current Award Balance:  
Project Start Date: Project End Date:  
Proposed Disposition:

Project Title:  
Sponsor:  
Workday AWD #: Current Award Balance:  
Project Start Date: Project End Date:  
Proposed Disposition:

Project Title:

Sponsor:

Workday AWD #:

Current Award Balance:

Project Start Date:

Project End Date:

Proposed Disposition:

Project Title:

Sponsor:

Workday AWD #:

Current Award Balance:

Project Start Date:

Project End Date:

Proposed Disposition:

Attach additional sheets if necessary to account for further projects.

**Approval**

Chair/Director:

Date:

Dean/VP:

Date:

**For Research & Innovation Use Only**

Associate VP, Research Administration/VP, Research & Innovation Approval:

Date:



## Equipment Transfer Request Form (SPETR)

Use this form to request permission to transfer any equipment from the University of Nevada, Reno (University). Attach completed, signed form to the Proposed Disposition Plan Cover Memo and forward to Sponsored Projects, MS 325. **No equipment may be removed from University property prior to the approval of the vice president for research and innovation and the sponsor (if applicable).**

### Requestor Information

Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_  
Unit: \_\_\_\_\_ Department: \_\_\_\_\_

### Equipment Information

Equipment Item: \_\_\_\_\_  
Serial #: \_\_\_\_\_ Item Location (Bldg & Room): \_\_\_\_\_  
UNR Asset #: \_\_\_\_\_ Worktag/Account # Paid From: \_\_\_\_\_  
UNR P.O. #: \_\_\_\_\_ Acquisition Cost: \_\_\_\_\_  
Acquisition Date: \_\_\_\_\_ Proposed Transfer Date: \_\_\_\_\_  
Transfer Justification: \_\_\_\_\_

Equipment Item: \_\_\_\_\_  
Serial #: \_\_\_\_\_ Item Location (Bldg & Room): \_\_\_\_\_  
UNR Asset #: \_\_\_\_\_ Worktag/Account Paid From: \_\_\_\_\_  
UNR P.O. #: \_\_\_\_\_ Acquisition Cost: \_\_\_\_\_  
Acquisition Date: \_\_\_\_\_ Proposed Transfer Date: \_\_\_\_\_  
Transfer Justification: \_\_\_\_\_

