



FIELD TRIAL / FIELD STUDY DEPOSIT APPROVAL FORM

FOR DEPOSIT OF NON-PROPRIETARY FIELD TRIALS AND FIELD STUDIES ONLY

THESE FUNDS ARE UNRESTRICTED IN REGARDS TO PUBLICATION AND OWNERSHIP OF ANY INTELLECTUAL PROPERTY THAT MAY BE CREATED

Type: New Deposit to Existing Account _____

_____ Amount _____ Date Received _____ Begin Date _____ End Date _____

PRINCIPAL INVESTIGATOR

_____ Name _____ Banner ID _____ Phone _____ E-mail Address _____

_____ Address: Department / Center _____ Dept / Ctr Org Code _____

FIELD SPONSOR

_____ Sponsor Name _____ Address _____

_____ Special Instructions: _____

_____ City _____ State _____ Zip Code _____

PROJECT INFORMATION

_____ Project Title: _____

Please briefly describe the general project area:

COMPLIANCE DATA

If any of the following categories are checked, additional clearances or approvals may be required prior to project initiation.

- Animal Use ACC# _____
- Recombinant DNA/RNA
- Radioactive Materials
- Hazardous Waste
- Human Subjects IRB# _____
- Good Lab Practices
- Hazardous Chemicals
- Biohazards

REQUIRED SIGNATURES

By signing, the below certify that this request is in compliance with the VT Policy 3630: *Definition and Deposit of Private Funds*. The undersigned also confirm that the above sponsor desires to support the Land Grant mission of Virginia Tech by supporting field trials or field studies in the area of research identified above, and whereas Virginia Tech has an ongoing field trial / field study program in this area consistent with the research interests of the sponsor.

_____ Principal Investigator _____ Department Head / Director _____ Dean _____

OSP Use Only

Revised 7/20/04

Reviewed _____ Entered _____ Proposal No. _____