EAST TENNESSEE STATE UNIVERSITY OFFICE OF RESEARCH AND SPONSORED PROGRAMS

Cost Waiver/Reduction Request

Principal Investigator:	
Department/College:	
Project Title:	
Sponsoring Agency:	
ORSPA #:	
IDC Reduction/Waiver Requested rate	_ %
Justification for waiver/reduction of Indirect Costs (F&A) or tuition waiver:	
Signatures:	
Department Chair	Date
Dean/Director	Date
*Tuition Waiver only	
Dean, Graduate Studies	Date
Vice Provost for Research	Date

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