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| **SPONSOR ADDITION FORM** |

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| **INSTRUCTIONS AND INFORMATION*** This form is to be submitted when a new sponsor needs to be added to the IRB-HSR database.
* An individual who is a UVA faculty or staff member may not be listed a Sponsor.
* **EMAIL form to:** **IRBHSRadmin@virginia.edu**

**-COMPLETE ALL SECTIONS BELOW-** |

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| **Sponsor Name:**       | **Sponsor Phone Number**       |
| **Physical Address:**       | **Website Address:**       |
| **City**       | **State**       | **Zip Code**       | **Country**       |
| **Check one:**[ ]  Industry (e.g. pharmaceutical company) [ ]  Foundation/Non-Profit Organization (e.g. American HeartAssociation)**[ ]** Internal/Departmental/Gift- (e.g. UVa/UVa departmental funds or UVA gift account) [ ]  Federal (e.g. NIH, DoD, NSF) If Federal is this sponsored by an NCI Cooperative Group: [ ] Yes [ ] No [ ]  State (e.g: Virginia Department of Health) [ ]  Non- UVA College or University (outside academic) |

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| **Submitted By:**       | **Email:**       | **Date:**       |

#### Comments: