



**List of Investigators for research funded by
the U.S. Public Health Service (PHS) / 5 Q 6
Awardee or Sub-Awardee.**

**In accordance with the PHS Policy on Subjecting Investigators, as well as
Investigators (non-funded) and Sub-Recipient Investigators (subject to a sub-award)**

**If this is a Sub-Awardee, this list is to include all Investigators, as well as
Investigators (non-funded) who are participating on the sub-award portion**

Date:
Funding Agency:
Project title:

Principal Investigator:
Other Investigator name and institution affiliation :
Other Investigator name and institution affiliation:
Other Investigator name and institution affiliation :

Please attach additional page if necessary.

Upon completion, return this form to your Grants Officer at the Office of Sponsored Research (OSR).