



Learning with Purpose

OFFICE OF SPONSORED PROGRAMS

EQUIPMENT AT-RISK ADVANCE ACCOUNT REQUEST FORM

Notice has been received from the sponsor that the proposal listed below will be funded and [documentation of that notice has been attached](#). Permission is requested to incur costs specifically for equipment in anticipation of the award or executed agreement. If the funding is not received, regardless of the reason, all charges not covered by the sponsor will be promptly transferred to the speedtype below. Should the speedtype not contain enough funds to pay the charges, by signing below the Chair agrees the Department will be financially responsible.

PI NAME		RES #	
SPONSOR NAME		PRIME SPONSOR (if applicable)	
ANTICIPATED START/END DATE		ANTICIPATED TOTAL AWARD AMOUNT	
AT-RISK ACCOUNT START DATE		AT-RISK ACCOUNT \$ AMOUNT	

**AT-RISK ACCOUNTS WILL BE SETUP FOR A MAXIMUM OF 90 DAYS
AT A MAXIMUM OF \$75,000.**

BACKUP SPEEDTYPE INFORMATION

This unrestricted, non-sponsored fund will be charged for any expenses not covered by the award.

SPEEDTYPE		FUND TYPE	
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NOTES (optional):

By checking this box, I confirm understanding of all risks associated with At-Risk Accounts; that any charges not covered by the sponsor regardless of the reason will be the responsibility of the PI and/or Department (as applicable).

ATTESTATIONS

By signing below, I am requesting an At-Risk Advance Account and will cover any expenses incurred if the award funds are not received, charges precede the period in which the sponsor will cover expenditures, or any other reason why a sponsor would deny covering charges.

PI Signature: _____

Chair Signature: _____

Please send this completed/signed form, an internal budget for the amount being requested, and be sure to attach documentation from the sponsor justifying the At-Risk Advance account to your GCA.