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REQUEST FOR WAIVER AND/OR REDUCTION OF INDIRECT COSTS

Application # \_\_\_\_\_  
Principal Investigator: \_\_\_\_\_  
Research Unit: \_\_\_\_\_  
Sponsor: \_\_\_\_\_  
Prime Sponsor [as applicable]: \_\_\_\_\_  
Title of Project: \_\_\_\_\_  
Project Period: \_\_\_\_\_

Budget Details:

- a) **Justification:** Please attach Sponsor Policy
- b) **Budget:** please attach
- c) Direct Costs Applied for, All Years \$ \_\_\_\_\_
- d) Sponsor Indirect Cost Rate: \_\_\_\_\_ %
- e) Indirect Costs Applied for, All Years \$ \_\_\_\_\_
- f) Current RFMH Standard Rate 32.5 %
- g) Indirect Costs at Standard Rate, All Years \$ \_\_\_\_\_
- h) Amount of Indirect Costs Waived \$ \_\_\_\_\_

\_\_\_\_\_  
Principal Investigator

\_\_\_\_\_  
Director of Research Institute