



Defined Research Account (DRA) Request Form

Use this form to request the setup of an account for an internally funded PI-initiated research project. This project should have an identifiable scope of work and require the use of animal or human subjects. See guidelines posted on the OPAM website.

Contact Name: _____ email: _____

Award and Project Information:

DRA Title: _____

Principal Investigator: _____

Organization Name: _____

Fiscal Manager: _____

Compliance Approval (IRB or IACUC) Number: _____

(Attach compliance approval paperwork to form)

Fund DRA with: (select one of the below)

Program Development Project: _____

OHSU FOMOPPL: _____

OHSU Foundation Check

Amount to Transfer: \$ _____

Certifications and Approvals:

The PI signature below indicates an agreement that the guidelines for the use of these funds will be followed at all times.

Principal Investigator

Date

Email completed form with proof of Compliance Approval to OPAM Central, orserv@ohsu.edu