



CRC Start-up Fee Waiver Request

Date of Request:	
Study Title:	
PI:	
Sponsor Name:	
Funding Source:	
IRB #:	
Pet Name:	

Coverage Analysis Fees

- Full Review
(Full Review is required for studies that generate charges at NM/UNMC)
- Modified Review
(Modified Review is required for studies that do not generate TNMC/UNMC-P charges)

Budget Negotiation Fees

- Budget Negotiation

Regulatory Submission Fees

- Initial Submission
- Amendment Submission
- Annual Regulatory Maintenance Fee

Rationale:

***Submit waiver request to Charles Miller, CRC Administrator at Charles.miller@unmc.edu*

(For Internal Use Only)

Approval Granted: Full Waiver Discounted Waiver Waiver not Approved

Signature of Clinical Research Center Administrator

Date

Comments:

