WAIVER REQUEST FOR WSU STATUTE 2.41.01.140

(REQUEST FOR WAIVER OF WSU CLAUSE PROHIBITING PUBLICATION RESTRICTIONS)

Note: This request must contain a specific and compelling justification for WSU to accept the publication restriction(s) based on the academic value of the proposed work.

Project Title:
Time Deadlines for this Proposal:
Dates of Proposed Research: to (end date)
Proposed Funding Level: _\$
Principal Investigator(s):
Campus Address:
Campus Phone Number:
Email Address:
Proposed Research Location
Building Name:
Room Number(s) / Lab Number(s):
Street Address:
Will this location be used <i>exclusively</i> for the proposed research?yesno
If no, describe immediately below what other activities will occur in this same location
Funding Source Place a check (✓) before the funding source and complete the relevant blank.
Federal Government: Agency Name:
Company: Name and Address:

(time period) / (% restriction)

Designation of Research Restriction

Note: See Section III Definitions of the Wayne State University Policy on Requesting a Waiver for Classified, Restricted or Proprietary Research for definitions of these terms.

- i. Place a check (\checkmark) before the appropriate designation.
- ii. Indicate the total time period (dates) and portion (by percentage) of the research governed if not 100%.

Example:(\(\sigma\)_ Classified Research (Federal C	Government designation) <u>1/1/2011—9/30/2011 / 75%</u>
_ Classified Research (Federal designation)	(time period) / (% restriction)
Proprietary Research (Sponsor designation)	(mat pariety) ((**138413481)
_ 1 Topricury Tescaren (oponson designation)	(time period) / (% restriction)

Non-Confidential Summary of the Proposed Research

Restricted Research (Sponsor designation)

Provide a brief synopsis in the space immediately below. Write in non-technical terms. *Only include information suitable for public dissemination*.

Note: Attach additional pages as necessary to completely answer the questions below.

Make sure that each answer contains the corresponding question heading.

Academic Value

- i. Describe the academic value and intellectual content of the proposed research.
- ii. Explain how this research may lead to significant new knowledge.
- iii. Explain how this research advances the University's principal mission of creating and disseminating knowledge.

Involvement and Impact on Non-Tenured WSU Researchers

- i. Describe the involvement of WSU students, postdoctoral researchers, and/or non-tenured faculty in the research.
- ii. Attach a detailed contingency plan that ensures timely completion of student degree requirements and the ability to publish study results critical to career advancement.

Impact on WSU's Open Academic Environment

Explain how the proposed research will impact WSU's open academic environment by examining:

- i. The extent and duration of special security arrangements.
- ii. The extent to which portions of the campus or foreign personnel will have restricted access.
- iii. The extent to which students and faculty involved in the research will be allowed to discuss their results with students and faculty not involved in the research.
- iv. The restrictions that will be applied to publication of results.

Impact on WSU Resources

Describe how the proposed research will impact WSU resources (funds, equipment, personnel, space, etc.) and explain:

- i. How this research will contribute new resources that can be applied to unclassified or unrestricted work.
- ii. How this research will require the dedication of resources that would otherwise be available for unrestricted work.

STATEMENT OF APPROVAL / DENIAL FOR WAIVING WSU STATUTE 2.41.01.140

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PRINCIPAL INVESTIGATOR

	I, with my signature below, hereby request a waiver to WSU Statute 2.41.01.140 for the above referenced research.
	(signature and date)
	(printed name)
DEAN (OF THE SCHOOL / COLLEGE
	College/School Name:
	Dean of College/School:
	As Dean of the College/School listed above, I, with my signature below, hereby grant my approval for requesting a waiver to WSU Statute 2.41.01.140 for the above referenced research.
	(signature and date)
	(printed name)
VICE P	PRESIDENT FOR RESEARCH
	As Vice President for Research, I, with my signature below, hereby grant my approval / denial for waiving WSU Statute 2.41.01.140 for the above referenced research.
	(signature and date)
	Stephen M. Lanier, Ph.D. Vice President for Research