1. Name of Requestor

2. Address
   Office Name (if applicable)
   Street Address
   City, State, Zip Code

3. Mailing Address (if different than answer to question 2)
   Street Address or Post Office Box
   City, State, Zip Code

4. Electronic Mailing Address of Requestor

5. Telephone Number of Requestor (please provide a telephone number where you may be reached between the hours of 8:00 a.m. – 5:00 p.m. Monday – Friday)

6. Name and Title of Investigator about whom you are inquiring

7. Name of the NIH-funded research project about which you are inquiring

8. Purpose of the Inquiry:

9. Comments (optional)

10. Preferred method of response transmission (Check one)
    o Electronic Mail
    o First Class Mail

11. Request Date: ____________________

When you complete this form, please email it to Janyce.lingo@jefferson.edu or you can send it via US Post Office to Ms. Janyce Lingo, Office of University Counsel, 1020 Walnut Street, 6th Floor, Philadelphia, PA 19107.