



**INTERNAL SERVICE ORDER FORM
BETWEEN UOG AND RCUOG**

Pursuant to the Operating Agreement between UOG and RCUOG, UOG requests RCUOG to provide services as may be required by the Principal Investigator in the administration of the following project:

UOG COLLEGE/UNIT: _____

UOG DEPARTMENT: _____

PROJECT NAME: _____

PROJECT PERIOD: FROM: _____ TO: _____

GL ACCOUNT #: _____
(Assigned by RCUOG Accounting Department)

PRINCIPAL INVESTIGATOR: _____ **EMAIL:** _____ **PHONE:** _____
Print Name

GRANT SPONSOR: _____ **GRANT/CONTRACT AMOUNT:** _____

ATTACH COPY OF GRANT AWARD NOTICE TO THIS FORM

SCOPE OF WORK (Brief explanation that fits in the space below):

NEW PROJECT REQUEST:

The conditions under which a project may be service ordered to RCUOG are listed below. Please checkmark which conditions may apply to this request and include an explanation/justification. Use additional sheets as necessary.

- Projects involving a private organization with unusual or complex requirements
- Projects in which there are unusual procurement problems such as major items of special equipment
- Projects in which much of the operation lies outside the Territory of Guam
- Projects in which there are human resource issues handled more effectively outside the UOG personnel system
- Projects in which there are substantial amount of technical operations, computer services, involvement with other RCUOG projects, etc.

Please explain: _____

Requested by Principal Investigator:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)

Approved by University of Guam Dean/Director:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)

Reviewed by RCUOG Chief Business Officer:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)

Reviewed by UOG ORSP Director, Contracts and Grants:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)

Reviewed by UOG ORSP Vice Provost:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)

Reviewed by UOG Senior Vice President:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)

Accepted by RCUOG Executive Director:

_____, _____, _____
Print Name Signature Date (MM/DD/YYYY)